

2

## Certificate of Marriage

86-38431

State of Maryland

LICENSE NO.  
137170

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24 day of Oct. 1986the following persons were by me united in marriage at Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name LAWRENCE C. HILLAge 33 Birthplace MD.  
(State)Groom's Residence 7700 FREDKERT AVE.Marital Status DIVORCEDBride's Name DEBRA L. LENNONAge 32 Birthplace MD.  
(State)Bride's Residence 219 N. LUZERNE AVE.Marital Status DIVORCEDRelationship to groom if any NONEEugene P. Bartell  
Name of Officiating Clergy or Authorized OfficerPastor  
Title and Religious Denomination or Office1728 Eastern Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on OCT 27 1986License Fee \$ 35SAUNDRA F. BANKS, CLERK  
Signature Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

24  
Patterson

LAWRENCE C. W. WILE  
7500 FREDRICK AVE.  
L. L. LUCAS  
2. 2. 2. LUCAS  
DIVORCED

August P. Bartell  
188 Eastern Ave.

OCT 3 1988

2

## Certificate of Marriage

86-38432

State of Maryland

LICENSE NO.

137160

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25 day of Oct. 1986

the following persons were by me united in marriage at

Balto., Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

THOMAS S LARSON

Age

38

Birthplace

MINN

(State)

Groom's  
Residence

210 PENN ST

Marital Status

DIVORCED

Bride's  
Name

JANINE K LELAND

Age

38

Birthplace

MASS.

(State)

Bride's  
Residence

1410 EUTAW PL

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date

OCT 3

86

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 27 1986

SAUNDRA E. BANKS, CLERK

License Fee \$

35<sup>00</sup>

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38433

LICENSE NO.  
137099

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25 day of Oct. 1986

the following persons were by me united in marriage at Balto. md  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EARL TILLMAN BAKER**

Age **65** Birthplace **GA**  
(State)

Groom's Residence **2914 SYLVAN AVE**

Marital Status **WIDOWER**

Bride's Name **GERALDINE LUCILLE SLATER**

Age **67** Birthplace **N Y**  
(State)

Bride's Residence **3152 KESWICK RD**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

License Date **OCT. 1st** 86

*Rw Lyle G. Lane*  
Name of Officiating Clergy or Authorized Officer

*Pastor*  
Title and Religious Denomination or Office  
*3439 Keswick Rd.*  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 27 1986**

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38434

LICENSE NO.  
137081

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25 day of Oct. 1986  
the following persons were by me united in marriage at Balto. md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **KEITH DWIGHT MATRO**

Age **24** Birthplace **MD.**  
(State)

Groom's  
Residence **2909 ROSS AVENUE**

Marital Status **SINGLE**

Bride's  
Name **BRENDA ELAINE STOEHR**

Age **29** Birthplace **MD.**  
(State)

Bride's  
Residence **8518 KAVANGH ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

Calvin L. Hudson  
Name of Officiating Clergy or Authorized Officer

License Date **OCT. 3rd** 86

Pastor  
Title and Religious Denomination or Office  
414 N. Luzerne Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 27 1986**

License Fee \$ 35<sup>00</sup>

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court



2

# Certificate of Marriage

State of Maryland

86-38435

LICENSE NO.

137056

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 25 day of Oct. 1986

the following persons were by me united in marriage at Balto. Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	SAMUEL L. ROBINSON	Age	26	Birthplace	MD.
Groom's Residence	2543 PERRING MANOR RD.	Marital Status	SINGLE		
Bride's Name	PAULINE L. HARPER	Age	26	Birthplace	MD.
Bride's Residence	2543 PERRING MANOR RD.	Marital Status	SINGLE		

Relationship to groom if any NONE

License Date SEPT 29 86

JW

James R. Jones  
Name of Officiating Clergy or Authorized Officer

Pastor  
Title and Religious Denomination or Office

1002 Somerset St.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 27 1986

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38436

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137045

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Oct. 1986

the following persons were by me united in marriage at Balto., Md.  
 (City or Town)  
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHRISTOPHER FRANCIS SOKOLIS** Age **24** Birthplace **MD.**  
 (State)

Groom's Residence **8181 MIDHAVEN ROAD. BALTO.CO., MD** Marital Status **SINGLE**

Bride's Name **MARY ANN KRAEMER** Age **25** Birthplace **MD.**  
 (State)

Bride's Residence **8181 MIDHAVEN ROAD. BALTO.CO., MD** Marital Status **SINGLE**

Relationship to groom if any **NONE**

*Rev. Thomas B. Loftus*  
 Name of Officiating Clergy or Authorized Officer

*Pastor*  
 Title and Religious Denomination or Office

*600 S. Conkling St.*  
 Address of Clergy or Authorized Office

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **SAUNDRA E. BANKS, CLERK**

License Fee \$ 35.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38437

LICENSE NO.  
136784

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 25 day of Oct. 1986

the following persons were by me united in marriage at Balto, md.  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL VINCENT SORTINO** Age **23** Birthplace **MD.**  
(State)  
Groom's Residence **7254 STRATTON WAY BALTO.CO.,MD.** Marital Status **SINGLE**  
Bride's Name **BABBARA ANN BADLIK** Age **30** Birthplace **MD.**  
(State)  
Bride's Residence **305 D HOLLY DR. BALTO. CO.,MD.** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

License Date **SEPT. 18 86**

Rev Rodney J. Aline  
Name of Officiating Clergy or Authorized Officer  
R. C. Priest  
Title and Religious Denomination or Office  
6420 E. Pratt St.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Oct 27 1986

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

86-38438

LICENSE NO.

136063

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 24 day of October, 1986

the following persons were by me united in marriage at

Balto., Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name CARL HENRY KRACKE, JR.

Age

23

Birthplace

MD.

Groom's

Residence 3200 OFFUTT RD., BALTO. CO., MD.

Marital Status

SINGLE

Bride's

Name JEAN ANN FISCHER

Age

19

Birthplace

(State) MD.

Bride's

Residence 5017 FREDERICK AVE.

Marital Status

SINGLE

Relationship to groom if any NONE

License Date OCT. 8

86

TT

License Fee \$ 3.00

Xavier Vitacolonna  
Name of Officiating Clergy or Authorized Officer

R. C. Priest  
Title and Religious Denomination or Office

3800 Frederick ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on OCT 27 1986

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

86-38439

State of Maryland

LICENSE NO.  
135301

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 25 day of Oct. 19 86

the following persons were by me united in marriage at Balto., md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD EUGENE REMEIKIS** Age **28** Birthplace **MD.**  
Groom's Residence **7803 ROCKBOURNE RD. BALTO.CO.,MD** Marital Status **SINGLE**  
Bride's Name **CHRISTINE MARIE LEE** Age **25** Birthplace **MD.**  
Bride's Residence **7803 ROCKBOURNE RD. BALTO.CO.,MD** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

License Date **JULY 17 86**

TT

License Fee \$ 25.00

John J. Allen  
Name of Officiating Clergy or Authorized Officer

Pastor  
Title and Religious Denomination or Office

911 S. Ellwood Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 29 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38440

LICENSE NO.  
135015

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 25 day of Oct. 19 86  
Balt. Md.  
(City or Town)

the following persons were by me united in marriage at \_\_\_\_\_  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **GEORGE F. MOUNTFORD**

Age **25** Birthplace **NEW YORK**  
(State)

Groom's  
Residence **3208 WHEATON WAY HOWARD CO., MD.**

Marital Status **SINGLE**

Bride's  
Name **EVANGELINE S. MAGBITANG**

Age **24** Birthplace **PHILIPPINES**  
(State)

Bride's  
Residence **2106 BURDOCK ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **AUG. 5,**

**86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 29 1986**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court





2

*Certificate of Marriage*  
*State of Maryland*

86-38441

LICENSE NO.  
 137101

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25TH OCTOBER 1986  
 day of \_\_\_\_\_

the following persons were by me united in marriage at BALTIMORE CITY  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT WAYNE CRAWFORD**  
 Groom's Residence **3222 EVERGREEN AVENUE**  
 Bride's Name **LISA ANN SCHLACK**  
 Bride's Residence **3222 EVERGREEN AVENUE**

Age **29** Birthplace **MD.**  
 (State)  
 Marital Status **DIVORCED**  
 Age **25** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BRUCE M. KELLEY**

Name of Officiating Clergy or Authorized Officer

**PASTOR- ST. LUKE EV. LUTHERAN CHURCH**

Title and Religious Denomination or Office

**7001 HARFORD RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on OCT 29 1986

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 2** **86**

TT

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38442

State of Maryland

LICENSE NO.  
137428

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Baltimore, Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ERIC MARSHALL SHELTON</b>	Age	<b>37</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>2811 WINCHESTER ST.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>RUDOLPHIA CHARLA NORRIS</b>	Age	<b>36</b>	Birthplace	<b>MD.</b>
Bride's Residence	<b>1614 E. 31ST. ST.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **OCT. 17,****86**License Fee **\$**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38443

State of Maryland

LICENSE NO.  
137418

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BRYCE A. TURNER**Age **29** Birthplace **VA.**  
(State)Groom's Residence **301 WOODBOURNE AVE.**Marital Status **SINGLE**Bride's Name **CYNTHIA E. BRAUN**Age **31** Birthplace **MD.**  
(State)Bride's Residence **301 WOODBOURNE AVE.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT 17 86**

JW

W. N. McKeachie  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or Office24 W. Saratoga Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86License Fee \$ 55.01**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38444

LICENSE NO.  
137368

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JEFFERSON DARNELL LIVINGSTON**

Age **29**

Birthplace **MD.**  
(State)

Groom's Residence **1910 E. 28TH STREET**

Marital Status **DIVORCED**

Bride's Name **HOPE LA FOUNTAINE SHIELDS**

Age **27**

Birthplace **MD.**  
(State)

Bride's Residence **1910 E. 28TH STREET**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

License Date **OCT. 16 86**

TT

License Fee \$ 35.00

D. Sighester Harris  
Name of Officiating Clergy or Authorized Officer

Methodist Minister  
Title and Religious Denomination or Office

111 Lakeside Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38445

State of Maryland

LICENSE NO.  
137350

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 19th day of Oct 1986

the following persons were by me united in marriage at

Balti-Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **CLARENCE H. JONES, SR**Age **39** Birthplace **VA.**  
(State)

Groom's

Residence **761 BARTLETT AVE.**Marital Status **DIVORCED**

Bride's

Name **LINDA FAY FORD**Age **30** Birthplace **N.C.**  
(State)

Bride's

Residence **761 BARTLETT AVE.**Marital Status **DIVORCED**

Relationship to groom if any

**NONE**License Date **OCT. 14 86**

TT

License Fee \$ 35.00Deneva F. Gaither  
Name of Officiating Clergy or Authorized OfficerMethodist  
Title and Religious Denomination or OfficeBalti Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38446

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137313

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	MICHAEL L. CIRRI	Age	22	Birthplace	MD.
Groom's Residence	120 REDBUD RD., HARFORD CO., MD.	Marital Status	SINGLE		
Bride's Name	REBECCA A. RODRIGUEZ	Age	22	Birthplace	MD.
Bride's Residence	5008 PILGRIM RD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

License Date **OCT. 15 86**

TT

License Fee \$

35<sup>00</sup>

Gordon Narvesson  
 Name of Officiating Clergy or Authorized Officer

Lutheran Minister  
 Title and Religious Denomination or Office

2407 Perry Wood Rd.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-23-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38447

# Certificate of Marriage

## State of Maryland

LICENSE NO.  
137185

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 17th day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **JAY DANTE MILLER**

Age **24** Birthplace **MD.**  
(State)

Groom's

Residence **327 S. FREMONT AVE.**

Marital Status **DIVORCED**

Bride's

Name **MICHELLE MARIE BENCZKOWSKI**

Age **26** Birthplace **MD.**  
(State)

Bride's

Residence **10239-K MALCOLM CIR. BALTO.CO.,MD**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 7TH 86**

Richard E. Parks.  
Name of Officiating Clergy or Authorized Officer

Munse  
Title and Religious Denomination or Office

Balti. Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38448

## Certificate of Marriage

State of Maryland

LICENSE NO.

137090

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **WILLIAM BANKS, JR.**Age **29**Birthplace **MD.**

(State)

Groom's

Residence **3509 POWHATTAN AVENUE**Marital Status **SINGLE**

Bride's

Name **TAMMY RENEE MC CAIN**Age **27**Birthplace **MD.**

(State)

Bride's

Residence **7417 REMOOR RD. BALTO. CO., MD.** Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 1ST****86**Harold A. Cente  
Name of Officiating Clergy or Authorized OfficerBaptist Minister  
Title and Religious Denomination or OfficeBalti Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86

License Fee \$

35<sup>00</sup>SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

86-38449

## State of Maryland

 LICENSE NO.  
137214

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

 I Hereby Certify that on the 10 day of Oct. 19 86

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **JUAN A KIMBLE**  
 Groom's Residence **5210 LOCH RAVEN BLVD**  
 Bride's Name **VALERIE J REDMOND**  
 Bride's Residence **5210 LOCH RAVEN BLVD**

 Age **23** Birthplace **WASH DC**  
 (State)  
 Marital Status **SINGLE**  
 Age **26** Birthplace **MD.**  
 (State)  
 Marital Status **DIVORCED**  
 Relationship to groom if any **NONE**

 License Date **OCT. 9 86**

 Rev. Purcell Edwards  
 Name of Officiating Clergy or Authorized Officer

 Pastor  
 Title and Religious Denomination or Office  
 4640 Rokeby Rd.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

 I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 27 1986**

 License Fee \$ 35

 SAUNDRA E. BANKS, CLERK  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38450

LICENSE NO.  
136885

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18 day of Oct 1986

the following persons were by me united in marriage at Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GEORGE THOMAS JACKSON, JR.** Age **27** Birthplace **MD.**  
(State)  
Groom's Residence **1205 HANDSWORTH PL. BALTO.CO., MD** Marital Status **SINGLE**  
Bride's Name **ANGELA YVONNE MASON** Age **24** Birthplace **MD.**  
(State)  
Bride's Residence **5618 SINCLAIR LANE** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

License Date **SEPT. 23 86**

TT

License Fee \$ 35.00

F. L. Reid  
Name of Officiating Clergy or Authorized Officer

Baptist Minister  
Title and Religious Denomination or Office

3100 Walbrook Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court



2

# Certificate of Marriage

86-38451

## State of Maryland

 LICENSE NO.  
136821

 Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

 I Hereby Certify that on the 18th day of Oct 1986

the following persons were by me united in marriage at

Balt. Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM H. FALLOWFIELD** Age **48** Birthplace **MD.**  
 (State)  
 Groom's Residence **3035 BUCKEYSTOWN PIKE FREDERICK CO., MD.** Marital Status **DIVORCED**  
 Bride's Name **FAYE A. HOUSTON** Age **43** Birthplace **N.C.**  
 (State)  
 Bride's Residence **2622 N. CALVERT STREET** Marital Status **DIVORCED**

 Relationship to groom if any **NONE**

 License Date **SEPT. 24, 86**

 License Fee \$ 35<sup>00</sup>
Eddie Blue  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

2300 W. Lafayette Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

 I hereby certify that the above is a true copy of a record filed in this  
 office on 10-23-86
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38452

LICENSE NO.  
 136647

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**BERNARD A KUHN JR**

Age **28** Birthplace

**MD.**  
 (State)

Groom's  
 Residence

**6728 BRENTWOOD AVE**

Marital Status

**SINGLE**

Bride's  
 Name

**DEBORAH A PONIS**

Age **22** Birthplace

**MD.**  
 (State)

Bride's  
 Residence

**3643 KENYON AVE**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 14,**

**86**

Richard F. Parker  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

6736 Youngstown Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-23-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38453

LICENSE NO.  
 136547

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Bethesda  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRANCIS R. PACZKOWSKI**

Age **21** Birthplace **MD.**  
 (State)

Groom's Residence **404 GILLESPIE ST. A.A. CO., MD.** Marital Status **SINGLE**

Bride's Name **LISA M. TONARELLI**

Age **20** Birthplace **MD.**  
 (State)

Bride's Residence **4315 CORTEZ RD. A.A. CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

Michael J. Oschik  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

3803 4th ST  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-23-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$           

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38454

LICENSE NO.  
 134695

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DOUGLAS LEE GOODMAN**

Age **25** Birthplace **MD.**  
 (State)

Groom's Residence **407 E. NORTHERN PARKWAY**

Marital Status **SINGLE**

Bride's Name **DELORES E. HAWKINS**

Age **27** Birthplace **MD.**  
 (State)

Bride's Residence **407 E. NORTHERN PARKWAY**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **JULY 10, 86**

Howard Queen  
 Name of Officiating Clergy or Authorized Officer

Baptist Minister  
 Title and Religious Denomination or Office

Balti. Md  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-23-86

**SARAH E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

25<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38455

State of Maryland

LICENSE NO.

133277

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18th day of Oct 19 86

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PAUL T. HEILMANN**Age **31**

Birthplace

**MD.**

(State)

Groom's Residence **826 WOODWARD ST.**

Marital Status

**SINGLE**Bride's Name **COLLEEN A. MECHAU**Age **18**

Birthplace

**MD.**

(State)

Bride's Residence **1144 W. PRATT ST.**

Marital Status

**SINGLE**Relationship to groom if any **NONE**License Date **APRIL 28, 86**License Fee \$ 20.00Michael Roach  
Name of Officiating Clergy or Authorized OfficerCatholic Priest  
Title and Religious Denomination or OfficeBalti. Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38456

State of Maryland

LICENSE NO.

134396

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18th day of Oct 1986

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DANNY B. BURR**Age **21** Birthplace **MD.**  
(State)Groom's Residence **405 BLOSSON LA., A.A. CO., MD.**Marital Status **SINGLE**Bride's Name **KAREN M. BLANKENSHIP**Age **20** Birthplace **MD.**  
(State)Bride's Residence **145 SOUTHMEADOW DR., A.A. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **JUNE 23,****86**License Fee \$ 25.00Michael Orshik

Name of Officiating Clergy or Authorized Officer

Minist

Title and Religious Denomination or Office

Balti Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-23-86**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38457

State of Maryland

LICENSE NO.

136010

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>LANTZ K. GLEISNER</b>	Age	<b>20</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>2500-A LINWOOD RD., BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>SANDRA M. JACKSON</b>	Age	<b>21</b>	Birthplace	<b>MD.</b>
Bride's Residence	<b>5510 TRAMORE RD.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any		<b>NONE</b>			

License Date **Aug. 15,** **86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on 10-23-86

License Fee \$

35.00**SAUNDRA E. BANKS, CLERK**

Signature -- Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38458

State of Maryland

LICENSE NO.

136280

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GREGORY LORENZO THORNTON**Age **29** Birthplace **MD.**  
(State)Groom's Residence **1035 E. ORLEANS STREET**Marital Status **DIVORCED**Bride's Name **KAREN STEPHANIE TERRY**Age **25** Birthplace **MD.**  
(State)Bride's Residence **1035 E. ORLEANS STREET**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **AUG 27****86****JW**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-23-86  
**SAUNDRA E. BANKS, CLERK**

License Fee \$

35.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38459

LICENSE NO.  
 136358

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19 day of Oct 1986

the following persons were by me united in marriage at

Balt. Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

PRINCE M.K. OFOSU-APPIAH

Age

29

Birthplace

GHANA

(State)

Groom's  
 Residence

4409 LA PLATA AVE

Marital Status

DIVORCED

Bride's  
 Name

NINA M OSBORNE

Age

28

Birthplace

MD.

(State)

Bride's  
 Residence

4409 LA PLATA AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date **SEPT. 2 86**

TT

License Fee \$ 35<sup>00</sup>

Maggie Artis  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

4117 Belvoir Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-23-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38460

State of Maryland

LICENSE NO.

136417

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	JOHN JOSEPH MOX, JR.	Age	30	Birthplace	MD.
				(State)	
Groom's Residence	5514 SELMA AVE. BALTO. CO., MD.	Marital Status	SINGLE		
Bride's Name	JULIA ANN STEVENS	Age	23	Birthplace	MD.
				(State)	
Bride's Residence	2211 GRAFTON SHOP RD. HARFORD CO., MD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

License Date **SEPT 9 86**

JW

Louis J. Nogles  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or Office24 W. Preston ST  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-23-86

License Fee \$

3.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38461

State of Maryland

LICENSE NO.  
137410

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18th day of Oct 19 86

the following persons were by me united in marriage at

Bethesda  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>WILLIAM D. HARRIS</b>	Age	<b>28</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>3803 BONNER RD. 2ND. FL.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>MARLENE E. MOYD</b>	Age	<b>32</b>	Birthplace	<b>MD.</b>
Bride's Residence	<b>3803 BONNER RD. 2ND. FL.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**License Date **OCT. 17TH 86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on 10-24-86License Fee \$ 05**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38462

LICENSE NO.  
137354

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 16<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES C WALKER**  
Groom's Residence **4202 TUSCANY CT**

Age **51** Birthplace **N CAR**  
(State)

Marital Status

**DIVORCED**

Bride's Name **ANN K FINKBEINER**  
Bride's Residence **4202 TUSCANY CT**

Age **43** Birthplace **ILL**  
(State)

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

Howard Nash

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 14** **86**

Minister  
Title and Religious Denomination or Office

2765 ST. Paul ST.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-24-86

License Fee \$ 35<sup>00</sup>

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38463

LICENSE NO.  
 137205

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 11 day of Oct 19 86

the following persons were by me united in marriage at

Balti Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS FRANKLYN NOEL**  
 Groom's Residence **722 EAST. 36TH STREET.**  
 Bride's Name **FRANCINE VICTORIA BERRY**  
 Bride's Residence **722 EAST. 36TH STREET.**

Age **35** Birthplace **VA.**  
 (State)  
 Marital Status **SINGLE**  
 Age **35** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 6** **86**

**TT**

License Fee \$

35.00

Wallie Aruen  
 Name of Officiating Clergy or Authorized Officer

Baptist Minister  
 Title and Religious Denomination or Office

837 Fresham Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-24-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

86-38464

LICENSE NO.

137085

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 11 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DONALD W MONTGOMERY

Age

18

Birthplace

S CAR  
(State)

Groom's  
Residence

1671 CLIFTVIEW AVE

Marital Status

SINGLE

Bride's  
Name

ZSAZSA D KILGORE

Age

19

Birthplace

S CAR  
(State)

Bride's  
Residence

1671 CLIFTVIEW AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT 1st

86

John F. Purnell  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

Balti Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-24-86

License Fee \$

35<sup>00</sup>

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court





2

## Certificate of Marriage

86-38465

State of Maryland

LICENSE NO.

137077

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**I Hereby Certify that on the 12<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Baltimore Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ALBERT E PHILLIPS**Age **37** Birthplace **MD.**  
(State)Groom's Residence **28 N BOND STREET**Marital Status **SINGLE**Bride's Name **PAMELA K LINDSAY**Age **36** Birthplace **MD.**  
(State)Bride's Residence **28 N BOND STREET**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **OCT 2nd** 86

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-24-86  
**SAUNDRA E. BANKS, CLERK**

License Fee \$

35<sup>00</sup>

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38466

LICENSE NO.  
137432

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 25 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ARCHER	J.	SMITH, JR.	Age	71	Birthplace	MD.
Groom's Residence	1558	MORELAND	AVE.	Marital Status	WIDOWER		
Bride's Name	MABEL	A.	BENNETT	Age	59	Birthplace	S. CAR.
Bride's Residence	1558	MORELAND	AVE.	Marital Status	WIDOW		

Relationship to groom if any NONE

License Date OCT 17 86

JW

Stanley Cause  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

Balti Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on 10-25-86

License Fee \$ 33

SAUNDRA E. BANKS, CLERK  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38467

State of Maryland

LICENSE NO.  
137434

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25 day of Oct 19 86

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICKEY M. HALL**Age **23** Birthplace **GERMANY**  
(State)Groom's Residence **1003 WICKLOW RD.**Marital Status **SINGLE**Bride's Name **GERALDINE A. DORSEY**Age **21** Birthplace **MD.**  
(State)Bride's Residence **1003 WICKLOW RD.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 20TH 86**Henry J. Thorne  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or Office112 W. Kossuth ST  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-28-86**SAUNDRA E. BANKS, CLERK**License Fee \$ 55

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38468

State of Maryland

LICENSE NO.

137437

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>RICHARD S. VRANKIN</b>	Age	<b>21</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>39 LYNDAL AVE., BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>SUSAN D. THOMPSON</b>	Age	<b>19</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>7508 EAGLEWALK CT., BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**License Date **OCT. 20 86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-28-86  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 5

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38469

LICENSE NO.  
 137084

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	EDWARD R. WEST, JR.	Age	43	Birthplace	MD.
Groom's Residence	3819 LIBERTY HGTS. AVE.	Marital Status	DIVORCED		
Bride's Name	JAQUELINE E. NIVENS	Age	35	Birthplace	MD.
Bride's Residence	7004 RUDISILL CT. APT. 3B, BALTO. CO., MD.	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

JOHN R. BRYANT

Name of Officiating Clergy or Authorized Officer

PASTOR-A.M.E.

Title and Religious Denomination or Office

1300 DRUID ILL AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-28-86

License Fee \$

35<sup>00</sup>

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38470

State of Maryland

LICENSE NO.  
137072

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18th day of OCTOBER 1986the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>THOMAS PERNELL SMITH, JR</b>	Age	<b>21</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>1612 N. HILTON STREET.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>WANDA LENIECE TAYLOR</b>	Age	<b>22</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>2415 PULASKI STREET.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**IRVIN C. LOCKMAN

Name of Officiating Clergy or Authorized Officer

**. UNITED METHODIST CLERGY**

Title and Religious Denomination or Office

**1119 W. LANVALE ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 2 86**

TT

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38471

LICENSE NO.  
 137316

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	MARCUS E. KIMBLE	Age	68	Birthplace	N. CAR.
				(State)	
Groom's Residence	1327 N. ELLWOOD AVE.	Marital Status	DIVORCED		
Bride's Name	DELAREE H. LEE	Age	42	Birthplace	MD.
				(State)	
Bride's Residence	1327 N. ELLWOOD AVE.	Marital Status	SINGLE		

Relationship to groom if any

NONE

License Date OCT 14 86

JW

Roy B. Johnson  
 Name of Officiating Clergy or Authorized Officer

Baptist Minister  
 Title and Religious Denomination or Office

Balti Md  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-21-86

License Fee \$ 35

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

State of Maryland

86-38472

LICENSE NO.  
137408

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 19<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRANK A. CALDARAZZO** Age **34** Birthplace **MD.**  
(State)  
Groom's Residence **2627 APT. A YORK WAY, BALTO.CO., MD.** Marital Status **DIVORCED**  
Bride's Name **VICTORIA L. WENSKI** Age **28** Birthplace **MD.**  
(State)  
Bride's Residence **2627 APT. A YORK WAY, BALTO.CO., MD.** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

License Date **OCT. 16 86**

TT

Franklin L. Wags  
Name of Officiating Clergy or Authorized Officer  
Methodist Minister  
Title and Religious Denomination or Office  
309 S Ellwood Ave.  
Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86License Fee \$ 35.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

State of Maryland

86-38473

LICENSE NO.

137406

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 13<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BURTON A HAMMACKER**

Age **75** Birthplace **MD**  
(State)

Groom's Residence **3014 STRANDEN RD**

Marital Status **WIDOWER**

Bride's Name **LINDA L ADAMS**

Age **38** Birthplace **MD.**  
(State)

Bride's Residence **3008 STRANDEN RD**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

License Date **OCT 17 1986**

jw

Neata Price

Name of Officiating Clergy or Authorized Officer

Minist

Title and Religious Denomination or Office

Balti Md

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

16-21-86  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 35

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38474

State of Maryland

LICENSE NO.

137403

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti - Md

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PHILLIP PEARMON** Age **45** Birthplace **MD.**  
 (State)  
 Groom's Residence **151 ST. MARGARET RD., A.A. CO., MD.** Marital Status **WIDOWER**  
 Bride's Name **YVONNE B. DIAS** Age **42** Birthplace **MD.**  
 (State)  
 Bride's Residence **4506 MANORVIEW RD.** Marital Status **DIVORCED**  
 Relationship to groom if any **NONE**

License Date **OCT. 17th** 86

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86License Fee \$ 30**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38475

State of Maryland

LICENSE NO.  
137400

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16 day of Oct 19 86

the following persons were by me united in marriage at

Balto Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	CHARLES H. WOODARD	Age	22	Birthplace	MD.
Groom's Residence	131 N. AISQUITH ST. APT. 7K	Marital Status	SINGLE		
Bride's Name	SIMONE Y. WASHINGTON	Age	22	Birthplace	MD.
Bride's Residence	2212 DIVISION ST.	Marital Status	SINGLE		

Relationship to groom if any:

NONE

License Date OCT 16 86

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on:

10-21-86  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage<sup>86-38476</sup>

State of Maryland

LICENSE NO.  
137392

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 13<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **KENNETH L. COLLINS**

Age **22** Birthplace **MD.**  
(State)

Groom's

Residence **25 WATERWOOD CT. BALTO.CO., MD.** Marital Status **SINGLE**

Bride's

Name **ROSE MARIE MENDENHALL**

Age **20** Birthplace **MD.**  
(State)

Bride's

Residence **5728 WHITE AVENUE**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT 16 86**

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-21-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 30

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38477

State of Maryland

LICENSE NO.

137386

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

EARN

FULLARD

Age

19

Birthplace

MD.

(State)

Groom's  
Residence

514

E.

27TH.

ST.

Marital Status

SINGLE

Bride's  
Name

LINDA

D.

BROWN

Age

18

Birthplace

MD.

(State)

Bride's  
Residence

514

E.

27TH.

ST.

Marital Status

SINGLE

Relationship to groom if any NONELicense Date OCT 1686

JW

Name of Officiating Clergy or Authorized Officer

Baptist Minister

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-21-86

License Fee \$

35SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38478

State of Maryland

LICENSE NO.

137377

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 18th day of Oct 1986

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HARRY WALKER**Age **46** Birthplace **MD.**  
(State)Groom's Residence **2017 N. BENTALOU STREET**Marital Status **DIVORCED**Bride's Name **MARY MARGRETTE ALSTON**Age **56** Birthplace **MD.**  
(State)Bride's Residence **2017 N. BENTALOU STREET**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **OCT. 16th 86**George Wilson

Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office95 Rosedale ST  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86License Fee \$ 35**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38479

State of Maryland

LICENSE NO.  
137370

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 19<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **MICHAEL SCOTT JOHNSON**Age **27** Birthplace **MD.**  
(State)Groom's  
Residence **103 VILLAGE OF PINE COURT**Marital Status **SINGLE**Bride's  
Name **DONNELL MARIE MANDELLA**Age **24** Birthplace **MD.**  
(State)Bride's  
Residence **103 VILLAGE OF PINE COURT**Marital Status **SINGLE**Relationship to groom if any **NONE**Stephen Rowe

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 16th 86**

Title and Religious Denomination or Office

Balti Md

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-21-86**SAUNDRA E. BANKS, CLERK**

License Fee \$

35<sup>00</sup>

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38480

LICENSE NO.  
 137369

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Bethesda  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JASON GREEN**  
 Groom's Residence **2705 ULMAN AVE**  
 Bride's Name **ROSE E BYRD**  
 Bride's Residence **2705 ULMAN AVE**

Age **31** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**  
 Age **23** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 16th 86**

Abram L. Watson  
 Name of Officiating Clergy or Authorized Officer

Baptist Minister  
 Title and Religious Denomination or Office

2630 Beryl Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-21-86

License Fee \$ 30

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38481

LICENSE NO.  
 137357

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 16<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD R. NORTON**

Age **31** Birthplace **MD.**  
 (State)

Groom's Residence **1905 W. MOSHER ST.**

Marital Status **SINGLE**

Bride's Name **SHERRIE Y. YOUNG**

Age **29** Birthplace **MD.**  
 (State)

Bride's Residence **4112 EDMONDSON AVE.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT 14 86**

William Rivers  
 Name of Officiating Clergy or Authorized Officer

Baptist Minister  
 Title and Religious Denomination or Office

Balti Md  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-21-86

License Fee \$ 50

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38482

LICENSE NO.  
137345

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **BRYAN KEVIN JOHNSON**

Age **24** Birthplace **MD.**  
(State)

Groom's  
Residence **7 GREENBURY CT. BALTO. CO., MD.**

Marital Status **SINGLE**

Bride's  
Name **PATRICIA ANN WONGUS**

Age **23** Birthplace **MD.**  
(State)

Bride's  
Residence **6738 WILMONT DR BALTO CO MD**

Marital Status **SINGLE**

Relationship to groom if any

License Date **OCT. 14 86**

TT

License Fee \$ 35

P. Edward Kenney  
Name of Officiating Clergy or Authorized Officer

Minist.  
Title and Religious Denomination or Office

4408 Liberty Hgts. Rd.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court



2

## Certificate of Marriage

86-38483

State of Maryland

LICENSE NO.

137329

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOSEPH E. HOLLEY

Age 22

Birthplace

MD.

(State)

Groom's

Residence

715 W. LANVALE ST

Marital Status

SINGLE

Bride's

Name

CAROLYN N. SCURRY

Age 22

Birthplace

MD.

(State)

Bride's

Residence

8053 SOLLEY RD

BALTO. CO.

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT. 14,

86

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-21-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38484

LICENSE NO.  
 137309

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Baltimore  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **DAVID ALLAN MINGES**  
 Groom's  
 Residence **1308 NORTHVIEW ROAD.**  
 Bride's  
 Name **MARY FRANCIS GUNTHER**  
 Bride's  
 Residence **1308 NORTHVIEW ROAD.**

Age **28** Birthplace **W. VA.**  
 (State)  
 Marital Status **SINGLE**  
 Age **26** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT 14 86**

**JW**

License Fee \$

**35<sup>00</sup>**

Anthony R. B. B.  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

5704 Roland Rd.  
 Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-21-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38485

LICENSE NO.  
 137277

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ROBERT FRANCIS MILLER	Age	23	Birthplace	MD. (State)
Groom's Residence	4 WOODTHORNE CT. BALTO. CO., MD.	Marital Status	SINGLE		
Bride's Name	JEAN MARIE TIGNALL	Age	21	Birthplace	MD. (State)
Bride's Residence	4 WOODTHORNE CT, BALTO. CO., MD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

License Date **OCT 13**

86

License Fee \$ 35<sup>00</sup>

Joseph De Pebris  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

5502 York Rd  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-21-86  
SAUNDRA E. BANKS, CLERK  
A. E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38486

LICENSE NO.  
137274

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **DERRICK LAMONT MANNING**  
Groom's  
Residence **429 E. LANVALE STREET.**  
Bride's  
Name **CHERYL JUANITA THOMAS**  
Bride's  
Residence **429 E. LANVALE STREET.**

Age **21** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**  
Age **22** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**

Relationship to groom if any

**NONE**



License Fee \$ 55.00

James Bull  
Name of Officiating Clergy or Authorized Officer  
Baptist Minister  
Title and Religious Denomination or Office  
1507 N. Bethel ST  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38487

LICENSE NO.  
 137267

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**JEFFREY SCOTT CARR**

Age **23**

Birthplace

**MD.**  
 (State)

Groom's  
 Residence

**4104 COLEMAN AVE.**

Marital Status

**SINGLE**

Bride's  
 Name

**TERRY ANN FRISBY**

Age **23**

Birthplace

**MD.**  
 (State)

Bride's  
 Residence

**3616 BONVIEW AVE.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 9TH** **86**

Chester Mieczkowski  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

Balti Md.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-21-86

License Fee \$

35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38488

State of Maryland

LICENSE NO.

137263

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

SCOTT BRIAN ETTIEN

Age 21

Birthplace

MD.

(State)

Groom's

Residence 2206 B WHITCOMB CIRCLE BALTO.CO., MD. Marital Status SINGLE

Bride's

Name DEBRA ANTOINETTE CAPRINOLO

Age 22

Birthplace

MD.

(State)

Bride's

Residence 4606 CROSSWOOD AVENUE

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT, 9,

86

License Fee \$

35<sup>00</sup>

Name of Officiating Clergy or Authorized Officer

Catholic Priest

Title and Religious Denomination or Office

Balto. Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-21-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38489

LICENSE NO.  
 137261

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balto Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HARRY WESLEY VAUGHN** Age **23** Birthplace **MD.**  
 (State)  
 Groom's Residence **6445 LEHNERT ST. BALTO. CO., MD.** Marital Status **SINGLE**  
 Bride's Name **NANCY LEE BURKETT** Age **26** Birthplace **MD.**  
 (State)  
 Bride's Residence **20 SHEPPARD LN. CARROLL CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 10th 86**

Walter Thomas  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

Balto Md  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-21-86

License Fee \$ 35<sup>00</sup>

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38490

## Certificate of Marriage

State of Maryland

LICENSE NO.

137258

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK KEVIN SMITH**Age **22** Birthplace **MD.**  
(State)Groom's Residence **1550 BOYLE STREET**Marital Status **SINGLE**Bride's Name **JOY LYNN BISHOP**Age **17** Birthplace **VA.**  
(State)Bride's Residence **1550 BOYLE STREET**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 10 86**

TT

License Fee \$ 35<sup>00</sup>

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38491

LICENSE NO.  
137245

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at Balto Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN ANDREW PANZER, JR** Age **27** Birthplace **MD.**  
(State)

Groom's Residence **1-A NATITA COURT. BALTO.CO., MD** Marital Status **SINGLE**

Bride's Name **MONICA RAE SPINNICHIO** Age **21** Birthplace **MD.**  
(State)

Bride's Residence **8721 SATYR HILL RD. BALTO.CO., MD** Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 10 86**

John Ballard  
Name of Officiating Clergy or Authorized Officer

Catholic Priest  
Title and Religious Denomination or Office

Balto Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86

License Fee \$ 35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court



2

## Certificate of Marriage

86-38492

State of Maryland

LICENSE NO.  
137236

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LOUIS CAVALLARO** Age **28** Birthplace **MD.**  
(State)Groom's Residence **8511 DRUMWOOD RD., BALTO.CO.,MD.** Marital Status **SINGLE**Bride's Name **JUDITH A. FUSTING** Age **27** Birthplace **MD.**  
(State)Bride's Residence **300 RIDGELY RD., BALTO.CO.,MD.** Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 8,****86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-21-86**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38493

LICENSE NO.  
 137517

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Oct 1986

the following persons were by me united in marriage at

*Balti Md*  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRED M LAUER JR**  
 Groom's Residence **3623 ELKADER RD**  
 Bride's Name **NANCY L RUST**  
 Bride's Residence **3623 ELKADER RD**

Age **39** Birthplace **OHIO**  
 (State)  
 Marital Status **DIVORCED**  
 Age **35** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 23** **86**

*Howard Nash*

Name of Officiating Clergy or Authorized Officer

*Minister*

Title and Religious Denomination or Office

*2705 ST. Paul ST.*

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

*10-28-86*

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 50

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38494

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137510

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 24 day of Oct 19 86

the following persons were by me united in marriage at Balti Ma  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY KARASZKIEWICZ, JR.** Age **20** Birthplace **KY.**  
(State)  
Groom's Residence **200-C SOUTHBRIDGE LA., A.A. CO., MD.** Marital Status **SINGLE**  
Bride's Name **GENNY LEE GELDMACHER** Age **18** Birthplace **MD.**  
(State)  
Bride's Residence **200-C SOUTHBRIDGE LA., A.A. CO., MD.** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

License Date **OCT. 24,** **86**

Mark Boling  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

401 Pontiac Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-24-86

License Fee \$ 20

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38495

LICENSE NO.  
137483

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS BERNARD SETTLE, JR.**

Age **29** Birthplace **MD.**  
(State)

Groom's Residence **2110 ALLENDALE ROAD**

Marital Status **SINGLE**

Bride's Name **GLORIA VERNETT HARRINGTON**

Age **24** Birthplace **MD.**  
(State)

Bride's Residence **2110 ALLENDALE ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**DAVID L. HARRISTON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 22 86**

**ASSOC. MINISTER - NEW MT. ZION BAPT. CHURCH**

Title and Religious Denomination or Office

**3900 RIDGEWOOD AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86

License Fee \$       

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

TT



2

*Certificate of Marriage*  
*State of Maryland*

86-38496

LICENSE NO.  
 137479

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD KEVIN GREENE**

Age **30** Birthplace **MD.**  
 (State)

Groom's Residence **3401 ARELLEN COURT.**

Marital Status **SINGLE**

Bride's Name **SHARON DENISE CLARK**

Age **29** Birthplace **MD.**  
 (State)

Bride's Residence **5643 GOVANE AVE.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**MARCUS G. WOOD**

Name of Officiating Clergy or Authorized Officer

**PASTOR- PROVIDENCE BAPT. CHURCH**

Title and Religious Denomination or Office

**1401 PENNSYLVANIA AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**10-28-86**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

25



2

## Certificate of Marriage

86-38497

State of Maryland

LICENSE NO.

137475

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25th day of OCTOBER 19 86the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROBERT L. JACKSON

Age **47**

Birthplace

MD.  
(State)

Groom's

Residence **1118 E. 20TH STREET**

Marital Status

**DIVORCED**

Bride's

Name **HENRIETTA P. BROOKS**Age **42**

Birthplace

MD.  
(State)

Bride's

Residence **263 S. HILTON STREET**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**JAMES D. NELSON

Name of Officiating Clergy or Authorized Officer

PASTOR- GREATER BETHLEHEM TEMPLE CHURCH

Title and Religious Denomination or Office

2100 N. EUTAW PL.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-28-86SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT. 21, 86**License Fee \$ 55

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38498

LICENSE NO.  
 137467

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 26th day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT KENNETH MOORE, JR.** Age **38** Birthplace **MD.**  
(State)

Groom's Residence **5715 FRANKLIN ST. A.A.CO., MD.** Marital Status **DIVORCED**

Bride's Name **KAREN DENISE HODGES** Age **24** Birthplace **MD.**  
(State)

Bride's Residence **# 6 W. ELEVENTH AVE. A.A.CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

**MICHAEL G. FAHEY**

License Date **OCT 20 86**

Name of Officiating Clergy or Authorized Officer  
**PASTOR - FIRST BAPT. CHURCH OF BROOKLYN**

Title and Religious Denomination or Office

**BALTIMORE CITY**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38499

LICENSE NO.  
 137405

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BRIAN U. MITCHELL**

Age **27** Birthplace **MD.**  
(State)

Groom's Residence **407 E. LYNN AVE**

Marital Status **SINGLE**

Bride's Name **KELLY M. CHISM**

Age **24** Birthplace **MD.**  
(State)

Bride's Residence **5174 VIADUCT AVE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**PASCHAL A. MORLINO, O.S.B.**

License Date **OCT 16 86**

JW

Name of Officiating Clergy or Authorized Officer  
**PASTOR-ST. BENEDICT ROMAN CATHOLIC CHURCH**

Title and Religious Denomination or Office  
**2612 WILKENS AVE.**

Address of Clergy or Authorized Officer  
**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-28-86

License Fee \$ \_\_\_\_\_

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38500

LICENSE NO.

137384

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 25th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JAMES D. GODDARD

Age 27 Birthplace MD.  
(State)

Groom's Residence 19 E. RANDALL ST.

Marital Status SINGLE

Bride's Name THERESA A. FAJARDO

Age 24 Birthplace MD.  
(State)

Bride's Residence 1115 S. HANOVER ST.

Marital Status SINGLE

Relationship to groom if any

NONE

HAROLD V. WHETSTONE

Name of Officiating Clergy or Authorized Officer

MINISTER- LUTHERAN CHURCH IN AMERICA

Title and Religious Denomination or Office

1004 WOODSON RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-28-86

License Fee \$ 5.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38501

LICENSE NO.  
137382

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18 TH day of OCTOBER 1986

the following persons were by me united in marriage at Baltimore City  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CARL FRANCIS SAILES**

Age **22** Birthplace **MD.**  
(State)

Groom's Residence **1115 N. FULTON AVENUE**

Marital Status **SINGLE**

Bride's Name **LA WANDA ROBERTA COOK**

Age **20** Birthplace **CA.**  
(State)

Bride's Residence **1193 N. FULTON AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**G. R. SIMPSON**

Name of Officiating Clergy or Authorized Officer

**MINISTER- ST. JOHN A. M.E. CHURCH**

Title and Religious Denomination or Office

**810 CARROLLTON AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **OCT. 17th 86**

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21204, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38502

LICENSE NO.  
 137376

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL D. KUSICK** Age **35** Birthplace **MD.**  
 (State)  
 Groom's Residence **377 CONSTITUTION COURT A.A.CO., MD.** Marital Status **DIVORCED**  
 Bride's Name **KAREN M. WITTEN** Age **27** Birthplace **MD.**  
 (State)  
 Bride's Residence **377 CONSTITUTION COURT A.A.CO., MD.** Marital Status **DIVORCED**  
 Relationship to groom if any **NONE**

**MARK R. BOLING**

**PASTOR- BROOKLIN UNITED METH. CHURCH**

**401 PONTIAC AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

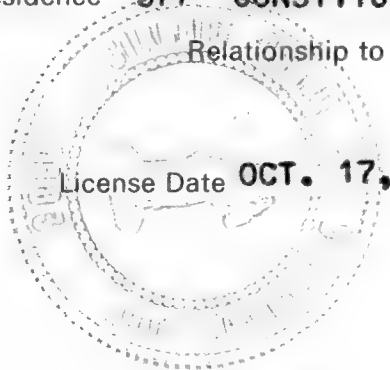
office on 10-28-86

License Fee \$ 50

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38503

LICENSE NO.  
137365

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KENNETH S LUCHS**

Age **52** Birthplace **PA.**  
(State)

Groom's Residence **5736 CROSS COUNTRY BLVD**

Marital Status **DIVORCED**

Bride's Name **CAROL B CAPLAN**

Age **45** Birthplace **PA.**  
(State)

Bride's Residence **5736 CROSS COUNTRY BLVD**

Marital Status **DIVORCED**

**NONE**

Relationship to groom if any

**FLOYD L. HERMAN**

Name of Officiating Clergy or Authorized Officer

**RABBI -JEWISH**

Title and Religious Denomination or Office

**6300 PARK HEIGHTS AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 17 86**

**TT**

License Fee \$ 35



2

## Certificate of Marriage

86-38504

State of Maryland

LICENSE NO.

137358

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26th day of OCTOBER 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STEVEN T. CHAMBERS**Age **29** Birthplace **MD.**  
(State)Groom's Residence **15 CHARLES PLAZA**Marital Status **SINGLE**Bride's Name **JOCELYN A. MEINL**Age **35** Birthplace **MD.**  
(State)Bride's Residence **15 CHARLES PLAZA**Marital Status **SINGLE**Relationship to groom if any **NONE****ARTHUR DAN GLECKLER**

Name of Officiating Clergy or Authorized Officer

**PASTOR- UNITED METH CHURCH**

Title and Religious Denomination or Office

**10 E. MT VERNON PL.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT 14 1986**

JW

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

86-38505

*Certificate of Marriage**State of Maryland*

LICENSE NO.

137344

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)***I Hereby Certify* that on the 25th day of OCTOBER 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD N. MC CORMICK**Age **44** Birthplace **MD.**  
(State)Groom's Residence **1072 TUNBRIDGE RD.**Marital Status **DIVORCED**Bride's Name **RUTH HARTLEY**Age **44** Birthplace **N. CAR.**  
(State)Bride's Residence **5228 KELWAY RD.**Marital Status **DIVORCED**

Relationship to groom if any

**NONE****MARK A. RIDDIX**

Name of Officiating Clergy or Authorized Officer

**PASTOR- MT. ZION BAPT.**

Title and Religious Denomination or Office

**2000 E. BELVEDERE AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**10-28-86**

License Fee \$

**35<sup>00</sup>****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38506

LICENSE NO.  
 137301

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WAYNE L. CVACH**

Age **34** Birthplace **MD.**  
(State)

Groom's Residence **4010 MORAVIA ROAD**

Marital Status **SINGLE**

Bride's Name **MARIA M. PICCOLO**

Age **27** Birthplace **PA.**  
(State)

Bride's Residence **3530 CARDENAS AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**DAVID LEARY**

Name of Officiating Clergy or Authorized Officer

**PASTOR- SHRINE OF LITTLE FLOWER R.C.**

Title and Religious Denomination or Office

**2854 BRENDAN AVE.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT 10 86**

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38507

LICENSE NO.  
 137271

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>HILTON HENSON HAYWARD, JR</b>	Age	<b>32</b>	Birthplace	<b>MD.</b> <small>(State)</small>
Groom's Residence	<b>4807 BAYONNE AVE.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>PEGGY ROLANDER YOUNG</b>	Age	<b>28</b>	Birthplace	<b>MD.</b> <small>(State)</small>
Bride's Residence	<b>4807 BAYONNE AVE.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

**ROMONA WILSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 9TH 86** **PASTOR- PENTECOSTAL ASSEMBLIES OF WORLD**  
Title and Religious Denomination or Office  
**2019 E. BIDDLE ST.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-28-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38508

## State of Maryland

 LICENSE NO.  
137222

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 25th day of OCTOBER 19 86

 the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RAYMOND BROWN**  
 Groom's Residence **2525 E. BIDDLE STREET.**  
 Bride's Name **MARGARET CALLEN**  
 Bride's Residence **2525 E. BIDDLE STREET.**

Age **52** Birthplace **MD.**  
(State)  
 Marital Status **DIVORCED**  
 Age **50** Birthplace **WASHINGTON D.C.**  
(State)  
 Marital Status **DIVORCED**

Relationship to groom if any **NONE**

COLLIER C. ALEXANDER

86 PASTOR- EASTSIDE BAPTIST CHURCH

Name of Officiating Clergy or Authorized Officer
Title and Religious Denomination or Office

3723 WOODBINE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 10-28-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

 License Date **OCT. 20,**

 License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38509

State of Maryland

LICENSE NO.  
137232

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16 day of October 1986

the following persons were by me united in marriage at

Balto, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>GARRY RIDEOUT</b>	Age	<b>26</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>1120 N. FREMONT AVE.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>VICTORIA A. HUGHES</b>	Age	<b>25</b>	Birthplace	<b>MD.</b>
Bride's Residence	<b>1113 WINCHESTER ST.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **OCT. 8TH** **86**

Benjamin J. Foust  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

810 N. Carrollton Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 21 1986**

License Fee \$

35**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38510

State of Maryland

LICENSE NO.  
137446

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20 day of Oct 1986

the following persons were by me united in marriage at

Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **FRANKLIN TIMOTHY AUSTIN**Age **19** Birthplace **MD.**  
(State)Groom's  
Residence **1111 WOODINGTON ROAD**Marital Status **SINGLE**Bride's  
Name **TAMARA MC FADDEN**Age **20** Birthplace **MD.**  
(State)Bride's  
Residence **2220 ROSEDALE STREET**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 20 86**

TT

George W. Smith  
Name of Officiating Clergy or Authorized OfficerBaptist Minister  
Title and Religious Denomination or Office719 N. Woodlawn Rd  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86License Fee \$ 55SAUNDRA E. BANKS, CLERK  
Signature of Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38511

LICENSE NO.  
 137401

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18 day of Oct 19 86

the following persons were by me united in marriage at

*Balti Md*  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>FRANK W. SCHUMAKER, JR.</b>	Age	<b>29</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>349 GATEWATER CT., A.A. CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>LINDA L. FLIPPIN</b>	Age	<b>28</b>	Birthplace	<b>MD.</b>
Bride's Residence	<b>349 GATEWATER CT., A.A. CO., MD.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

License Date **OCT. 16 86**

TT

License Fee \$ \_\_\_\_\_

*William F. Jones*  
 Name of Officiating Clergy or Authorized Officer

*Minister*  
 Title and Religious Denomination or Office

*Balti Md*  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-22-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38512

LICENSE NO.  
 137372

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 19 day of Oct 1986

the following persons were by me united in marriage at

Balt. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EARL SULLIVAN ROY, SR.**

Age **38** Birthplace **MD.**  
 (State)

Groom's Residence **462 WATTY COURT**

Marital Status **SINGLE**

Bride's Name **YVONNE ANNETTE JENIFER**

Age **40** Birthplace **MD.**  
 (State)

Bride's Residence **462 WATTY COURT**

Marital Status **WIDOW**

Relationship to groom if any **NONE**

License Date **OCT. 16th** 86

Edward Mc Clusker  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

3726 Oak Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-22-86

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38513

State of Maryland

LICENSE NO.  
137346

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

STEPHEN E VOLKER

Age

31

Birthplace

MD.

(State)

Groom's  
Residence

11 CASTLEHILL CT BALTO CO MD

Marital Status

SINGLE

Bride's  
Name

JANE F MOSKO

Age

24

Birthplace

MD.

(State)

Bride's  
Residence

34 DUNKIRK RD BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT. 14 86

TT

License Fee \$

35<sup>00</sup>

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38514

LICENSE NO.  
 137332

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

DAVID D LOUDEN

Age 24

Birthplace MD.  
 (State)

Groom's  
 Residence

3143 DILLON ST

Marital Status SINGLE

Bride's  
 Name

CAROL F SADOWSKI

Age 24

Birthplace MD.  
 (State)

Bride's  
 Residence

3143 DILLON ST

Marital Status SINGLE

Relationship to groom if any

NONE

License Date OCT 15 86

JW

Hubert Derouge  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

911 S. Ellwood Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-22-86

License Fee \$

35.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38515

State of Maryland

LICENSE NO.  
137325Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**I Hereby Certify that on the 18 day of Oct 19 86

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RODNEY KENNEDY**Age **26** Birthplace **MD.**  
(State)Groom's Residence **1940 WALBROOK AVE.**Marital Status **SINGLE**Bride's Name **KAREN S. BRISCOE**Age **22** Birthplace **MD.**  
(State)Bride's Residence **4207 MAINE AVE.**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **OCT. 14, 86**Vernon Simmons  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or OfficeBalti Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86License Fee \$ 35<sup>00</sup>SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38516

State of Maryland

LICENSE NO.  
137295Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**I Hereby Certify that on the 19th day of Oct 1986

the following persons were by me united in marriage at

Bethesda  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK ANTHONY WILLIAMS**Age **23** Birthplace **MD.**  
(State)Groom's Residence **1205-H VALLEYBROOK CT. BALTO.CO., MD**Marital Status **SINGLE**Bride's Name **BERTHA LEE MURRAY**Age **20** Birthplace **MD.**  
(State)Bride's Residence **1205-H VALLEYBROOK CT. BALTO.CO., MD**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **OCT. 10, 86**License Fee \$ 35.00

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38517

State of Maryland

LICENSE NO.

137275

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18th day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIAM LEE BURTON, 3RD

Age

31

Birthplace

MD.

(State)

Groom's  
Residence

812 WASHBURN AVE.

Marital Status

DIVORCED

Bride's  
Name

KATHLEEN DENISE SOBOTKA

Age

29

Birthplace

MD.

(State)

Bride's  
Residence

1514 POPLAND STREET.

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

OCT 9 86

JW

Michael Orchik  
Name of Officiating Clergy or Authorized Officer

Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

Title and Religious Denomination or Office

Balti Md  
Address of Clergy or Authorized Officer

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-22-86  
SAUNDRA E. BANKS, CLERK

License Fee \$

35

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38518

LICENSE NO.  
137188

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 17th day of Oct 19 86

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL L TEMPLE**  
Groom's Residence **4603 MARY AVE**  
Bride's Name **KELLY A HODGES**  
Bride's Residence **5715 WHITE AVE**

Age **27** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**  
Age **26** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**  
**NONE**

Relationship to groom if any

License Date **OCT. 9, 86**

License Fee \$ 35.00

Mitchell Rozanski  
Name of Officiating Clergy or Authorized Officer

Catholic Priest  
Title and Religious Denomination or Office

4414 Frankford Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38519

State of Maryland

LICENSE NO.

137158

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11th day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RANDAL DUANE HAYES** Age **26** Birthplace **CALIFORNIA**  
 Groom's Residence **871 CENTURY ST. CARROLL CO., MD** Marital Status **SINGLE**  
 Bride's Name **LAUREN MALLOY MC DONOUGH** Age **26** Birthplace **MD.**  
 Bride's Residence **871 CENTURY ST. CARROLL CO., MD** Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **OCT. 3,****86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86

License Fee \$

35.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38520

LICENSE NO.  
137135

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**GREGORY BRYAN MARSHALL**

Age **26**

Birthplace

**MD.**  
(State)

Groom's  
Residence

**5006 EUGENE AVE.**

Marital Status

**SINGLE**

Bride's  
Name

**GINA MARIE D'AVELLA**

Age **26**

Birthplace

**MD.**  
(State)

Bride's  
Residence

**5006 EUGENE AVE.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT 2 86**

**JW**

Roy A. Maack  
Name of Officiating Clergy or Authorized Officer

Lutheran Minister  
Title and Religious Denomination or Office

Balti Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86

License Fee \$ 35

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court





2

# Certificate of Marriage

86-38521

State of Maryland

LICENSE NO.  
137130

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 19th day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KEVIN L. CONNELLY** Age **27** Birthplace **MD.**  
(State)

Groom's Residence **416 MACHIAS PL., BALTO.CO.,MD.** Marital Status **SINGLE**

Bride's Name **LOUISE MANGIONE** Age **24** Birthplace **MD.**  
(State)

Bride's Residence **4016 BRIAR POINT RD., BALTO.CO.,MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 8th** **86**

Arthur Bassess  
Name of Officiating Clergy or Authorized Officer

Catholic Priest  
Title and Religious Denomination or Office

4420 Frankford Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86

License Fee \$ 35.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38522

State of Maryland

LICENSE NO.  
137114

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17 day of Oct 1986

the following persons were by me united in marriage at

Balt. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **PAUL PALMER SEED, JR**

Age

**35**

Birthplace

**S.C.**  
(State)

Groom's

Residence **8645 OAKLEIGH RD. BALTO.CO., MD**

Marital Status

**DIVORCED**

Bride's

Name **ELLEN MARIE MURRAY**

Age

**26**

Birthplace

**MD.**  
(State)

Bride's

Residence **7331 STRATTON WAY. BALTO.CO., MD**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**License Date **OCT. 2nd****86**Name of Officiating Clergy or Authorized Officer  
John W. LintonTitle and Religious Denomination or Office  
Baptist MinisterAddress of Clergy or Authorized Officer  
504 Fairview Ave.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86SAUNDRA E. BANKS, CLERK

License Fee \$

35.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38523

LICENSE NO.  
 137083

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at Balt. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **THOMAS PATRICK CONROY**

Age **32** Birthplace **MD.**  
 (State)

Groom's  
 Residence **2600 FAIT AVENUE**

Marital Status **SINGLE**

Bride's  
 Name **JOYCE MARY BAUBLIS**

Age **30** Birthplace **MD.**  
 (State)

Bride's  
 Residence **2600 FAIT AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 10 86**

Joseph Breenham  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

5300 N. Charles ST  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-22-86

License Fee \$ 35<sup>00</sup>

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38524

State of Maryland

LICENSE NO.

135120

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17 day of Oct 19 86

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RODNEY ALLEN HILL**Age **29** Birthplace **MD.**  
(State)Groom's Residence **2617 FOERSTER AVENUE**Marital Status **SINGLE**Bride's Name **GRETCHEN OPHELIA ROSE**Age **27** Birthplace **MD.**  
(State)Bride's Residence **2218 ROUND ROAD**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **JULY 10 86**

TT

License Fee \$ 25.00

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

86-38525

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137007

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at Balti Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>MICHAEL ANTHONY ATKINSON</b>	Age	<b>21</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>351 RUPERT CT. A.A.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>MARGARET ELIZABETH LOWMEN</b>	Age	<b>22</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>601 PONTIAC AVENUE</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

License Date **OCT 17 86**

*Michael J. Orchuk*  
 Name of Officiating Clergy or Authorized Officer

*Minister*  
 Title and Religious Denomination or Office

*Balti Md*  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-22-86

License Fee \$ 35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38526

State of Maryland

LICENSE NO.

136069

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BRIAN JAMES KIRSCH**Age **29** Birthplace **MD.**  
(State)Groom's Residence **3723 WHITE PINE RD. BALTO.CO., MD.** Marital Status **SINGLE**Bride's Name **SHARON ANN KRUEGER**Age **31** Birthplace **MD.**  
(State)Bride's Residence **3771 RAVENWOOD AVENUE** Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **AUG. 20th** **86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-22-86License Fee \$ 30.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

32

2

*Certificate of Marriage*  
*State of Maryland*

86-38527

LICENSE NO.  
 136658

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 27 day of Sept 1986

the following persons were by me united in marriage at

Balti. Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL R. POMPEANO**

Age **37** Birthplace **N J**  
 (State)

Groom's Residence **HADDONFIELD N J**

Marital Status **SINGLE**

Bride's Name **ROSEMARIE P PRINCIPATO**

Age **29** Birthplace **N J**  
 (State)

Bride's Residence **PINE HILL N J**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

License Date **SEPT. 11, 86**

Fredrick Rutledge  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

1268 Algonquin Rd.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-1-86

SAINDRA F. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 30.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38528

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 136921

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of SEPTEMBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JACOB ROSS GLASER.**

Age **24** Birthplace **MD.**  
(State)

Groom's Residence **BURLINGTON, VERMONT**

Marital Status **SINGLE**

Bride's Name **CAITLIN WENDY LOGAN**

Age **30** Birthplace **N.Y.**  
(State)

Bride's Residence **BURLINGTON, VERMONT**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**EARL A. JORDAN**

Name of Officiating Clergy or Authorized Officer

**RABBI- BOLTON ST SYNAGOGUE**

Title and Religious Denomination or Office

**6206 GREENSPRING AVE.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 1 1986**

License Fee \$

**35<sup>00</sup>**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38529

State of Maryland

LICENSE NO.

136172

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27th day of SEPTEMBER 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JOSEPH EZRA MARSHALLAge 33 Birthplace DELAWARE  
(State)Groom's Residence DELMAR, DELAWAREMarital Status SINGLEBride's Name MELVINA HELEN BRANDFORDAge 28 Birthplace NEW YORK  
(State)Bride's Residence BROOKLYN, NEW YORKMarital Status SINGLERelationship to groom if any NONEANTHONY R. WILLIAMS

Name of Officiating Clergy or Authorized Officer

License Date SEPT. 5, 86PASTOR- FIRST ABYSSINNA BAPT. CHURCH

Title and Religious Denomination or Office

4337 ELDONE AVENUE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 6 1986  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-30530

LICENSE NO.  
 136967

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27th day of SEPTEMBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TIMOTHY DEAN HINKOFER**

Age **24** Birthplace **FLORIDA**  
(State)

Groom's Residence **HERNANDO., FLORIDA**

Marital Status **SINGLE**

Bride's Name **BARBARA JEAN HOWELL**

Age **20** Birthplace **MARYLAND.**  
(State)

Bride's Residence **HERNANDO., FLORIDA**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**EDGAR T. HUTTON**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 25, 86**

**MINISTER- NORTHSIDE BAPT. CHURCH**

Title and Religious Denomination or Office

**1100 E. NORTHERN PKWY.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 9 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38531

LICENSE NO.  
 136572

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23 day of Sept 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WARREN STOREY**

69

Age **27** Birthplace **NEW YORK**  
 (State)

Groom's Residence **NEW YORK, NEW YORK**

Marital Status **SINGLE**

Bride's Name **LETITIA W. BAILEY**

25

Age **26** Birthplace **MARYLAND**  
 (State)

Bride's Residence **4225 ROLAND VIEW AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **SEPT 22 86**

JW

License Fee \$ 35.00

Howard L. Camper  
 Name of Officiating Clergy or Authorized Officer

Unit  
 Title and Religious Denomination or Office

Balti Md  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-7-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38532

LICENSE NO.  
 136276

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27 day of Sept 1986

the following persons were by me united in marriage at

Balti. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STEPHEN JOHN MEROS** 25 Age **32** Birthplace **MD.** (State)  
 Groom's Residence **11850 BLUE FEBRUARY WAY HOWARD CO., MD.** Marital Status **SINGLE**  
 Bride's Name **KAREN MARIE KARWACKI** 67 Age **31** Birthplace **MD.** (State)  
 Bride's Residence **CAMDEN COUNTY, NEW JERSEY** Marital Status **SINGLE**  
 Relationship to groom if any **NONE**

License Date **AUG. 25 86**

TT

License Fee \$ 35<sup>00</sup>

John Barbarnitz  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

408 N Charles St  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on

**SAUNDRA E. BANKS, CLERK** 10-1-86

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38533

LICENSE NO.  
 136556

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Sept 1986

the following persons were by me united in marriage at

Balti. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **KEITH ANTHONY WILLIAMS**

Age **25** Birthplace **WASH., D.C.**  
 (State)

Groom's  
 Residence **WASHINGTON, D. C.**

Marital Status **SINGLE**

Bride's  
 Name **PHYLLIS RENA FAIR**

Age **23** Birthplace **ALABAMA**  
 (State)

Bride's  
 Residence **909 ROSE STREET**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **SEPT. 9,**

**86**

Samuel T. Lee  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

Balti. Md.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-14-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38534

State of Maryland

LICENSE NO.

136960

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11 day of Oct 19 86

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL FRANCIS BRESSLER**Age **35** Birthplace **MD.**  
(State)Groom's Residence **RICHMOND, VIRGINIA**Marital Status **SINGLE**Bride's Name **KIMBERLY PARIS ASHTON**Age **24** Birthplace **VA.**  
(State)Bride's Residence **RICHMOND, VIRGINIA**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 10,****86**

License Fee \$

35.00Bretchen Van Wit  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or OfficeBalto. Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-14-86**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38535

State of Maryland

LICENSE NO.  
136904

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 12 day of Oct 19 86

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name EDWARD A. LENZ

67

Age 64 Birthplace IOWA  
(State)Groom's  
Residence FREEHOLD, NEW JERSEYMarital Status WIDOWERBride's  
Name SHIRLEY M. MARSHALL

25

Age 50 Birthplace MARYLAND  
(State)Bride's  
Residence 564 RENEE DR. HARFORD CO., MD.Marital Status DIVORCEDRelationship to groom if any NONELicense Date SEPT 24 86

JW

Donald Biggs  
Name of Officiating Clergy or Authorized OfficerLutheran Minister  
Title and Religious Denomination or OfficeBalti - Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-14-86SAUNDRA E. BANKS, CLERKLicense Fee \$ 35<sup>00</sup>

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38536

LICENSE NO.  
136661

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 11<sup>th</sup> day of OCT 19 86

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES R FRIEDE**  
Groom's Residence **LANCASTER PA**  
Bride's Name **JUDITH C PARK**  
Bride's Residence **LANCASTER PA**

Relationship to groom if any

Age **28** Birthplace **N CAR**  
(State)  
Marital Status **SINGLE**  
Age **38** Birthplace **CONN**  
(State)  
Marital Status **DIVORCED**  
**NONE**

License Date **OCT. 3rd** **86**

Albert W. Bush  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

Balti Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-14-86

License Fee \$ 35.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court





2

## Certificate of Marriage

86-38537

State of Maryland

LICENSE NO.  
137046

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11 day of Oct 19 86

the following persons were by me united in marriage at

Beth Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WAYNE W DAVIS

25

Age 32

Birthplace

MD.  
(State)

Groom's

Residence

10101 WOODLAKE DR BALTO CO MD

Marital Status

SINGLE

Bride's

Name

DOLORES M HOGARTH

Age 29

Birthplace

MD.  
(State)

Bride's

Residence

MORRIS PLAINS N J

67

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

OCT 7 86

jw

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-14-86  
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38538

LICENSE NO.  
 136251

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 4<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Balti Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN STEVEN JAPP**

Age **27** Birthplace **FLORIDA**  
 (State)

Groom's Residence **ORANGE COUNTY, FLORIDA**

Marital Status **SINGLE**

Bride's Name **SUSANNA LOUISE STEIN**

Age **27** Birthplace **MARYLAND**  
 (State)

Bride's Residence **ORANGE COUNTY, FLORIDA**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **AUG 25 86**

F. Lyman Farnham  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

1409 Bolton St  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-7-86  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38539

LICENSE NO.  
136922

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 4<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MC CLINTON H WEBB**

Age **35** Birthplace **MINN**  
(State)

Groom's Residence **MINNEAPOLIS MINN**

Marital Status **SINGLE**

Bride's Name **KAREN A WYNN**

Age **32** Birthplace **MD.**  
(State)

Bride's Residence **1549 STONEWOOD RD**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **SEPT. 24th 86**

Bruce Johnson  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

3446 Erdman Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-7-86

License Fee \$ 3.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38540

LICENSE NO.  
 136761

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 4th day of Oct 1986

the following persons were by me united in marriage at Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD LEE BOSWELL**

Age **22** Birthplace **MD.**  
 (State)

Groom's Residence **WILIMINGTON., N.C.**

Marital Status **SINGLE**

Bride's Name **ELIZABETH ANN CIFARELLI**

Age **21** Birthplace **MD.**  
 (State)

Bride's Residence **7459 DURWOOD RD. BALTO.CO.,MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **SEPT. 18th 86**

John F. Cunningham  
 Name of Officiating Clergy or Authorized Officer

Catholic Priest  
 Title and Religious Denomination or Office

Balti Md  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35<sup>00</sup>

16-7-86  
**SAUNDRA E. PARKS CLERK**  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38541

LICENSE NO.  
 136715

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 4<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CARL E. WHITE**  
 Groom's Residence **MILLERSVILLE., PA.**

Age **27** Birthplace **PA.**  
(State)  
 Marital Status **SINGLE**

Bride's Name **GRACE E. MENGES**  
 Bride's Residence **3114 GARRISON BLVD**

Age **26** Birthplace **N.Y.**  
(State)  
 Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **SEPT. 30th 86**

Walter Menges  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

Balti Md  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-7-86

License Fee \$ 30.00

**SAUNDRA E. BANKS, CLERK**  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38542

LICENSE NO.  
135057

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 4<sup>th</sup> day of Oct. 1986

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RANDALL S. PACE**  
Groom's Residence **ATLANTA, GEORGIA**

Age **26** Birthplace **MD.**  
(State)

Marital Status **SINGLE**

Bride's Name **GINA L. CIFARELLI**

Age **23** Birthplace **MD.**  
(State)

Bride's Residence **7459 DURWOOD RD. BALTO. CO., MD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **JULY 31st** **86**

John P. Cunningham  
Name of Officiating Clergy or Authorized Officer

Catholic Priest  
Title and Religious Denomination or Office

Balti - Md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-7-86

License Fee \$ 25.00

SAUNDRA E. PARKS  
Signature of Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38543

LICENSE NO.  
 136339

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 1-1<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at Balt. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DENNIS MC CARTER**  
 Groom's Residence **MANHATTAN., NEW YORK**

Age **40** Birthplace **N.C.**  
 (State)

Marital Status **SINGLE**

Bride's Name **EMMA LOUISE WASHINGTON**  
 Bride's Residence **3510 MANCHESTER AVE.**

Age **27** Birthplace **MD.**  
 (State)

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **Aug. 28th 86**

Milton Waters  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

2225 Poplar Drive ST  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-7-86

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38544

LICENSE NO.

135460

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 4<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES EDWARD SCOTT** 67

Age **38**

Birthplace **ALABAMA**  
(State)

Groom's Residence **181 BURGESS PL. PASSAIC, N.J.**

Marital Status

**DIVORCED**

Bride's Name **GLORIA DOLORES WHITE** 25

Age **38**

Birthplace **MARYLAND**  
(State)

Bride's Residence **2035 HOLLINS STREET**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

License Date

**JULY 29 86****JW**

Arthur Jones  
Name of Officiating Clergy or Authorized Officer

Baptist Minister  
Title and Religious Denomination or Office

Balti. Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-7-86**SAUNDRA E. BANKS, CLERK**

License Fee \$

25<sup>00</sup>

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38545

LICENSE NO.  
 137164

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 7 day of Oct 19 86

the following persons were by me united in marriage at

Balti. Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ARTHUR C. WAKEFIELD**

Age **27** Birthplace **NEBRASKA**  
 (State)

Groom's Residence **ELKHORN, NEBRASKA**

Marital Status **SINGLE**

Bride's Name **DIANE M. MORSE**

Age **26** Birthplace **NEBRASKA**  
 (State)

Bride's Residence **OMAHA, NEBRASKA**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 3 86**

License Fee \$ 35

John R. Sabatelli  
 Name of Officiating Clergy or Authorized Officer

Lutheran Minister  
 Title and Religious Denomination or Office

Balti. Md.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-7-86  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38546

LICENSE NO.  
137091

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 4th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>JAMES W. THOMPSON, SR.</b>	Age	<b>42</b>	Birthplace	<b>N. CAR.</b>
				(State)	
Groom's Residence	<b>HOUSTON CO., ALA.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>MARYANN THOMAS</b>	Age	<b>36</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>HOUSTON CO., ALA.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**E.M. TAYLOR**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 1 86** **PRIEST- CATHOLIC**

Title and Religious Denomination or Office

**JW 1701 REGENT RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on **OCT 8 1986**

License Fee \$ **35<sup>00</sup>**

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court



2

## Certificate of Marriage

86-38547

State of Maryland

LICENSE NO.  
136747Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**I Hereby Certify that on the 4th day of OCTOBER 1986the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KARL CLAYTON DUNN**Age **23**Birthplace **TX.**  
(State)Groom's Residence **BRONX., NEW YORK**Marital Status **SINGLE**Bride's Name **MARY ELIZABETH BRADLEY**Age **23**Birthplace **MASS.**  
(State)Bride's Residence **2225 W. JOPPA RD. BALTO.CO., MD**Marital Status **SINGLE**

Relationship to groom if any

**NONE****EDWARD M. GAFFNEY**

Name of Officiating Clergy or Authorized Officer

**PRIEST- CATHOLIC**

Title and Religious Denomination or Office

**630 E. ST. S.W. WASH.D.C.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 8 1986**License Fee \$ 30**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38548

LICENSE NO.  
 136717

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 11 day of Oct 1986

the following persons were by me united in marriage at

Balti Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LEMBIT ALAR JOGI**

Age **25** Birthplace **CANADA**  
 (State)

Groom's Residence **TORONTO., CANADA**

Marital Status **SINGLE**

Bride's Name **KRISTINA ANNETTE ULM**

Age **25** Birthplace **MARYLAND.**  
 (State)

Bride's Residence **4454 SILVER SPRING RD. BALTO.CO.,MD**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **SEPT. 17 86**

TT

License Fee \$ 20.00

Randolph Troost  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

Balti Md.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-17-86

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38549

LICENSE NO.  
 137395

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 26th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GARY R. DAYTON** 43 Age **31** Birthplace **MD.**  
(State)  
 Groom's Residence **DUDLIN, CALIFORINA** Marital Status **SINGLE**  
 Bride's Name **DEBRA A. MC GEHEE** 25 Age **25** Birthplace **MD.**  
(State)  
 Bride's Residence **2512 PLAINFIELD RD., BALTO.CO., MD.** Marital Status **SINGLE**  
 Relationship to groom if any **NONE**

License Date **OCT 16 86**

jw

License Fee \$ 5.00

**RICHARD EDWARD PARKS**

Name of Officiating Clergy or Authorized Officer

**PASTOR- SACRED HEART OF MARY R.C. CHURCH**

Title and Religious Denomination or Office

**6736 YOUNGSTOWN AVE.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on 10 - 28 - 86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38550

LICENSE NO.  
 137549

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 26 day of Oct 1986

the following persons were by me united in marriage at

Balti-Ma  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRANK H TANNER JR**  
 Groom's Residence **SAN FRANCISCO CALIF**

43

Age **44** Birthplace **TEXAS**  
 (State)  
 Marital Status **DIVORCED**

Bride's Name **DORIS M BRYAN**  
 Bride's Residence **NASHVILLE TENN**

77

Age **43** Birthplace **MD.**  
 (State)  
 Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

License Date **OCT. 24TH 86**

Charles A. Johnson  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

1215 Southern Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-24-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38551

# Certificate of Marriage

State of Maryland

LICENSE NO.

136986

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 19<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT E SHAPIRO**

Age **31** Birthplace **N Y**  
(State)

Groom's Residence **MANHATTAN N.Y.**

Marital Status **SINGLE**

Bride's Name **SHARON L MORRISON**

Age **30** Birthplace **PA.**  
(State)

Bride's Residence **MANHATTAN N Y**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **SEPT. 25th 86**

Chaim Stern

Name of Officiating Clergy or Authorized Officer

Rabbi

Title and Religious Denomination or Office

Baltimore

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-24-86

License Fee \$

3.50

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38552

LICENSE NO.  
 137206

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 18<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Baltimore  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES MICHAEL BAKER**

69

Age 26

Birthplace

MD.

(State)

Groom's Residence **WATERTOWN, NEW YORK**

Marital Status

SINGLE

Bride's Name **JOHNNA LYNN HODGE**

Age 23

Birthplace

MD.

(State)

Bride's Residence **4202 EDONE AVE.**

Marital Status

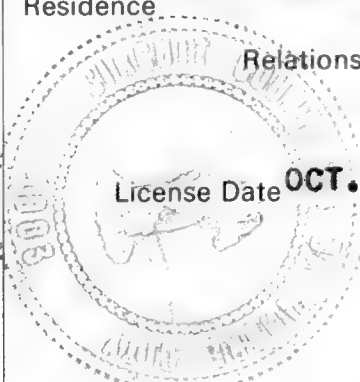
SINGLE

Relationship to groom if any

NONE

License Date **OCT. 6,**

86



Samuel Moore  
 Name of Officiating Clergy or Authorized Officer

Baptist Minister  
 Title and Religious Denomination or Office

9989 Guilford Rd  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-24-86

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





3

CLERGY or AUTHORIZED OFFICER: This certificate must be returned  
 .....in five days of the marriage to the Clerk of the Court in area where  
 license was issued.

*Certificate of Marriage*  
*State of Maryland*

86-38553

LICENSE NO.  
 137240

Copy for Clerk of Court  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 11th day of October 19 86

the following persons were by me united in marriage at Baltimore Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **CHARLES R BERTSCH**

Age **32** Birthplace **MICH**  
(State)

Groom's  
 Residence **ARLINGTON VA**

Marital Status **SINGLE**

Bride's  
 Name **DONNA L FRANK**

Age **29** Birthplace **ILL**  
(State)

Bride's  
 Residence **ARLINGTON VA**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 10TH 86**

*Donald H Frank* DD  
 Signature of Officiating Clergy or Authorized Officer

**PASTOR** **Presbyterian Church (USA)**  
 Title and Religious Denomination or Office

**2310 Windsor Drive Caldwell, Idaho 83605**  
 Address of Clergy or Authorized Officer

**DONALD H FRANK, DD**  
 Type or Print Name as signed above

License



2

*Certificate of Marriage*  
*State of Maryland*

86-38554

LICENSE NO.  
134776

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL H RUPERT**

Age **31** Birthplace **WISC**  
(State)

Groom's Residence **DETROIT MICH**

Marital Status **SINGLE**

Bride's Name **JOANNE D STAFFORD**

Age **33** Birthplace **MD.**  
(State)

Bride's Residence **DETROIT MICH**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **JUNE 26** **86**

James F. Mc Andrews  
Name of Officiating Clergy or Authorized Officer

Catholic Priest  
Title and Religious Denomination or Office

Balt. Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-23-86

License Fee \$ 25.00

**SHANDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38555

LICENSE NO.  
 137080

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 25TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>EUGENE E. PRESTON</b>	Age	<b>30</b>	Birthplace	<b>PA.</b>
				(State)	
Groom's Residence	<b>NORFOLK, VIRGINIA</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>JOYCE L. KALINOWSKI</b>	Age	<b>25</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>NORFOLK, VIRGINIA</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

**JOHN C. BION DO**

Name of Officiating Clergy or Authorized Officer

**ASSOC. PASTOR- ST. MARY**

Title and Religious Denomination or Office

**5502 YORK RD.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 29 1986**

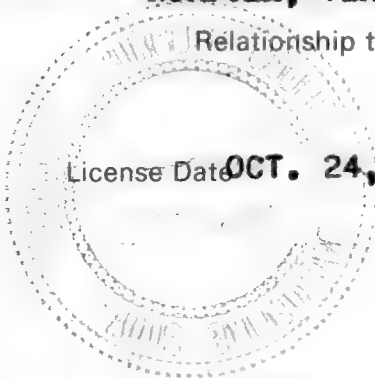
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 24,**

**86**

License Fee \$ **35<sup>00</sup>**



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38556

State of Maryland

LICENSE NO.  
136337Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**I Hereby Certify that on the 25 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	TERRY L. DUNLAP	75	Age	28	Birthplace	PA.
					(State)	
Groom's Residence	LANCASTER, PA.		Marital Status		SINGLE	
Bride's Name	JAYNE R. DILLER	25	Age	28	Birthplace	IA.
					(State)	
Bride's Residence	67 AIGBURTH AVE., BALTO.CO., MD.		Marital Status		SINGLE	

Relationship to groom if any NONE

License Date AUG 29 86

JW

License Fee \$

35<sup>00</sup>

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-28-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38557

LICENSE NO.  
 136965

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 13<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balt. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	LAWRENCE J.	KAPPAUF	Age	23	Birthplace	DEL.
		40			(State)	
Groom's Residence	WILMINGTON, DEL.		Marital Status	SINGLE		
Bride's Name	ELIZABETH L.	MEDINGER	Age	22	Birthplace	MD.
					(State)	
Bride's Residence	1023 HART RD., BALTO.CO., MD.		Marital Status	SINGLE		
Relationship to groom if any	NONE					

License Date **SEPT. 30th** 86

Charles Kratz Sr.  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

Balt. Md.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-20-86

License Fee \$ 35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

State of Maryland

86-38558

LICENSE NO.  
134540

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **RICHARD THOMAS LESCHEK**Age **27**Birthplace **NEW JERSEY**  
(State)

Groom's

Residence **CARTERET, NEW JERSEY**Marital Status **SINGLE**

Bride's

Name **ELLEN DARYL WERBER**Age **25**Birthplace **WASH., D.C.**  
(State)

Bride's

Residence **705 KERWIN ROAD MONT. CO., MD.**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **JULY 16 86**

tt

License Fee \$ 25.00Stephen Rowe  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or OfficeBalti Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86SAUNDRA E. BANKS, CLERK  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38559

LICENSE NO.  
 136582

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 18 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DONALD SCOTT SWIFT**

Age **28** Birthplace **CONN.**  
 (State)

Groom's Residence **NEW YORK, NEW YORK**

Marital Status **SINGLE**

Bride's Name **MAJORIE MERWIN HARVEY**

Age **26** Birthplace **MD.**  
 (State)

Bride's Residence **1866 CIRCLE RD. BALTO. CO., MD.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **SEPT. 10 86**

TT

License Fee \$ **35.00**

David W. Malone  
 Name of Officiating Clergy or Authorized Officer

Minister  
 Title and Religious Denomination or Office

1316 Park Ave.  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-21-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38560

## Certificate of Marriage

State of Maryland

LICENSE NO.

137248

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CARL ANTHONY COBBS

44

Age 25

Birthplace

PA.  
(State)Groom's  
Residence

COLORADO SPRINGS., COLORADO

Marital Status

SINGLE

Bride's  
Name

STACEY LORELL PINN

Age 24

Birthplace

MD.  
(State)Bride's  
Residence

OMAHA., NEBRASKA

64

Marital Status

SINGLE

Relationship to groom if any

NONE

Marvins Wood

Name of Officiating Clergy or Authorized Officer

Minist

Title and Religious Denomination or Office

Balti. Md

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-15-86

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date OCT. 9, 86

License Fee \$

35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38561

State of Maryland

LICENSE NO.  
136876

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11 day of Oct 19 86

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT PATRICK MURPHY**Age **43** Birthplace **IOWA.**  
(State)Groom's Residence **4419 WICKFORD ROAD.**Marital Status **SINGLE**Bride's Name **EMILY YING CHEW**Age **33** Birthplace **CHINA.**  
(State)Bride's Residence **TORONTO., CANADA**Marital Status **DIVORCED**

Relationship to groom if any

**NONE**License Date **SEPT. 26 86**Martin Strempeck  
Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

2401 N. Charles ST  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-16-86

License Fee \$

35<sup>00</sup>SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38562

State of Maryland

LICENSE NO.  
135865Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**I Hereby Certify that on the 15 day of Aug. 7 19 86

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ODUM E. SMITH**Age **19** Birthplace **N.C.**  
(State)Groom's Residence **651 W. LAFAYETTE AVENUE**Marital Status **SINGLE**Bride's Name **HELEN ALICIA HILL**Age **19** Birthplace **S.C.**  
(State)Bride's Residence **651 W. LAFAYETTE AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**Barbara Pitt

Name of Officiating Clergy or Authorized Officer

License Date **AUG. 11th****86**Deputy Clerk Circuit Court

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-7-86**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38563

LICENSE NO.  
137238

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD AMANDOUS BENTON**  
Groom's Residence **1004 E. LANVALE STREET**  
Bride's Name **DEMETRIUS LUELLA FRAZIER**  
Bride's Residence **722 EXETER HALL AVENUE**

Age **28** Birthplace **N. CAR**  
(State)  
Marital Status **SINGLE**  
Age **28** Birthplace **MD.**  
(State)  
Marital Status **BIVORCED**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 10 86**

jw

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on OCT 10 1986

License Fee \$ 35.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court



2

## Certificate of Marriage

86-38564

State of Maryland

LICENSE NO.  
137148

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 10th day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

**KENNETH MULDER**Age **25**

Birthplace

**N.C.**

(State)

Groom's

Residence

**4708 GREENSPRING AVE.**

Marital Status

**SINGLE**

Bride's

Name

**GAIL DENISE BROWN**Age **26**

Birthplace

**MD.**

(State)

Bride's

Residence

**4708 GREENSPRING AVE.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10th 86****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ **35.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

86-38565

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137303

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>THOMAS ANTHONY HEWITT</b>	Age	<b>25</b>	Birthplace	<b>N.Y.</b> (State)
Groom's Residence	<b>6604 COPPERIDGE DR. BALTO.CO.,MD</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>EILEEN AMY GORMAN</b>	Age	<b>24</b>	Birthplace	<b>N.Y.</b> (State)
Bride's Residence	<b>6604 COPPERIDGE DR. BALTO.CO.,MD</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 10 86**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35<sup>00</sup>

**OCT 1 0 1986**  
**SAUNDRA E. BANKS, CLERK**  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38566

State of Maryland

LICENSE NO.  
135742

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 10TH day of OCTOBER 19 86the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ERNEST FRED RAWLINGS**Age **36** Birthplace **MD.**  
(State)Groom's  
Residence **2413 TERRA FIRMA ROAD**Marital Status **SINGLE**Bride's  
Name **SHIRLEY ANN DONALDSON**Age **32** Birthplace **MD.**  
(State)Bride's  
Residence **2701 SPELLMAN ROAD**Marital Status **SINGLE**Relationship to groom if any **NONE****BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 10 1986****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00License Date **AUG. 5th****86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

• CM • FLOHIT.ME

2

# Certificate of Marriage

State of Maryland

86-38567

LICENSE NO.  
137300

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10th day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>RALPH J. GODWIN, JR.</b>	Age	<b>22</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>459 LAMBERT CT., BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>ELESA L. VARGA</b>	Age	<b>19</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>459 LAMBERT CT., BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10th 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 14 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

**35**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38568

LICENSE NO.  
137319

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JAMES T. GAYLES Age 42 Birthplace MD.  
(State)  
Groom's Residence 7402 FAIRBROOK PL., BALTO.CO., MD. Marital Status DIVORCED  
Bride's Name BERNADETTE L. BARR Age 40 Birthplace MD.  
(State)  
Bride's Residence 1442 MAPLE AVE., BALTO.CO., MD. Marital Status DIVORCED  
Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 14 86 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on OCT 14 1986

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

86-38569

State of Maryland

LICENSE NO.

137176

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 14 day of Oct 1986

the following persons were by me united in marriage at

Balt. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

EUGENE LEONARD HANSEL

Age 46

Birthplace

MD.  
(State)

Groom's

Residence

645 S. LAKEWOOD AVENUE

Marital Status DIVORCED

Bride's

Name

ANNA NOREEN WALTON

Age 41

Birthplace

MD.  
(State)

Bride's

Residence

645 S. LAKEWOOD AVENUE

Marital Status DIVORCED

Relationship to groom if any NONE

License Date OCT. 6TH

86

Joan Anderson  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-14-86

License Fee \$

35<sup>00</sup>

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38570

LICENSE NO.  
137340

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14TH. day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ARTHUR EUGENE ARMSTEAD**

Age **48** Birthplace **MD.**  
(State)

Groom's Residence **2 SULKY CT. BALTO. CO., MD.**

Marital Status **DIVORCED**

Bride's Name **BRENDA FAYE TALIAFERRO**

Age **35** Birthplace **N.C.**  
(State)

Bride's Residence **545 MOSHER STREET**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 14,**

**86**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 1 4 1986**

License Fee \$ **35<sup>00</sup>**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38571

LICENSE NO.  
137137

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>FRANCIS P. CIOCIOLA</b>	Age	<b>35</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>612 S. ROSE ST.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>BEVERLY L. MAJORS</b>	Age	<b>32</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>612 S. ROSE ST.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any		<b>NONE</b>			

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

**OCT 1 4 1988**

License Fee \$ 3.50

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38572

LICENSE NO.  
 137347

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	STEVEN L MEYERS	Age	34	Birthplace	MD. (State)
Groom's Residence	1103 SANDYSTONE RD BALTO CO MD	Marital Status	SINGLE		
Bride's Name	JOYCE L THOMAS	Age	34	Birthplace	MD. (State)
Bride's Residence	1103 SANDYSTONE RD BALTO CO MD	Marital Status	SINGLE		
Relationship to groom if any	NONE				

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT 14 86

JW

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 1 4 1986

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38573

LICENSE NO.  
137363

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ALEXANDER STEVENSON	Age	23	Birthplace	MD. <small>(State)</small>
Groom's Residence	3303 DEVONSHIRE DRIVE	Marital Status	SINGLE		
Bride's Name	LOLA ANGUS	Age	28	Birthplace	JAMAICA <small>(State)</small>
Bride's Residence	3303 DEVONSHIRE DRIVE	Marital Status	SINGLE		
Relationship to groom if any		NONE			

RISA A. HUMPHRIES

Name of Officiating Clergy or Authorized Officer

License Date OCT. 14 86

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 14 1986

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38574  
LICENSE NO.  
13 000

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7TH day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH CALVIN GODSIE**  
Groom's Residence **321 S. PABRISH STREET**  
Bride's Name **NANCY L. WETZEL**  
Bride's Residence **779 YALE AVENUE**

Age **61** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**  
Age **51** Birthplace **MD.**  
(State)  
Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

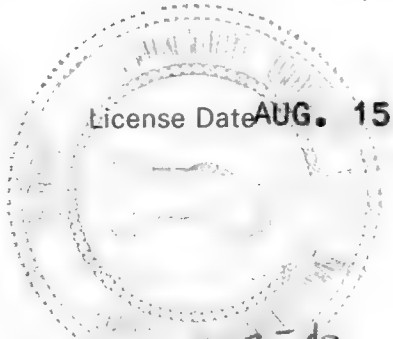
Name of Officiating Clergy or Authorized Officer  
**DEPUTY CLERK-CIRCUIT COURT.**

Title and Religious Denomination or Office  
**100 N. CALVERT ST.**

Address of Clergy or Authorized Officer  
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on

**7 1986**  
**SAUNDRA E. BANKS, CLERK**



License Date **AUG. 15,** 86

License Fee \$ **35.00**

Signature Clerk of the Court



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38575

LICENSE NO.  
137129

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7TH day of OCTOBER 1986

BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **AUSTIN LEROY GOSNELL**

Age **34** Birthplace **MD.**  
(State)

Groom's  
Residence **1004-A W. 38TH STREET.**

Marital Status **DIVORCED**

Bride's  
Name **MARGARET ELIZABETH BERGGREN**

Age **40** Birthplace **MD.**  
(State)

Bride's  
Residence **1004-A W. 38TH STREET.**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

**100 N. CALVERT ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 7 1986**

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38576

LICENSE NO.  
137144

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID T. WINEBRENNER**

Age **32** Birthplace **MD.**  
(State)

Groom's Residence **3431 ASH STREET**

Marital Status **DIVORCED**

Bride's Name **GAYLE L. ROBERTS**

Age **26** Birthplace **MD.**  
(State)

Bride's Residence **3431 ASH STREET**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 7 86**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

**TT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 7 1986**

License Fee \$ 3.50

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21204, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

86-38577

## Certificate of Marriage

State of Maryland

LICENSE NO.

137136

Copy for State Department of Health and Mental Hygiene

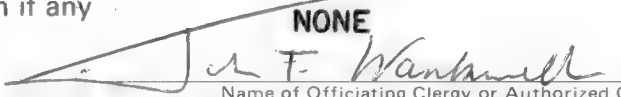
**BALTIMORE CITY (30)**I Hereby Certify that on the 10TH day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **WAYNE FRANCIS HAYES**Age **26** Birthplace **MD.**  
(State)Groom's  
Residence **ENDYMION RD. HOWARD CO., MD** Marital Status **SINGLE**Bride's  
Name **TAMMY DEE PATTERSON** Age **26** Birthplace **MD.**  
(State)Bride's  
Residence **38 E. BARNEY STREET.** Marital Status **SINGLE**

Relationship to groom if any

**NONE**
  
 Name of Officiating Clergy or Authorized Officer  
**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**  
 Title and Religious Denomination or Office
License Date **OCT. 2,****86**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 1 01986**  
**SAUNDRA E. BANKS, CLERK**
License Fee \$ 35<sup>2</sup>

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38578

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137231

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ALBERT HENRY MICHIE**

Age **45** Birthplace **VA.**  
 (State)

Groom's Residence **5012 GOODNOW ROAD.**

Marital Status **DIVORCED**

Bride's Name **DEBORAH ANN SAVAGE**

Age **22** Birthplace **MD.**  
 (State)

Bride's Residence **770 W. SARATOGA STREET.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT 8**

**86**

John F. Washburn  
 Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
 Title and Religious Denomination or Office

**JW**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-10-86

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38579

LICENSE NO.  
 135443

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>JOHN KARL FITCH</b>	Age	<b>42</b>	Birthplace	<b>MD.</b> <small>(State)</small>
Groom's Residence	<b>1154 W. HAMBURG STREET.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>DEBORAH MARIE LAUGHLIN</b>	Age	<b>30</b>	Birthplace	<b>MD.</b> <small>(State)</small>
Bride's Residence	<b>1154 W. HAMBURG STREET.</b>	Marital Status	<b>DIVORCED</b>		

Relationship to groom if any **NONE**

License Date **OCT. 10TH 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-10-86

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38580

LICENSE NO.  
 137279

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JIMMIE JEROME COX, SR.** Age **48** Birthplace **MICHIGAN**  
(State)  
 Groom's Residence **1232 HOLMESPUN DR. A.A.CO., MD.** Marital Status **DIVORCED**  
 Bride's Name **REBECCA LEE SMITH** Age **28** Birthplace **VIRGINIA**  
(State)  
 Bride's Residence **1232 HOLMESPUN DR. A.A.CO., MD.** Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10TH 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on OCT 10 1986

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38581

LICENSE NO.  
137246

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 9TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ERIC J. THOMAS**  
Groom's  
Residence **1604 W. FAYETTE STREET**

Age **22** Birthplace **MD.**  
(State)

Marital Status **SINGLE**

Bride's  
Name **LISHA Y. TILLERY**  
Bride's  
Residence **1633 W. FAYETTE STREET**

Age **22** Birthplace **MD.**  
(State)

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 8th**

**86**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 9 1986**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 35.30

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38582

State of Maryland

LICENSE NO.  
136682

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9TH. day of OCTOBER 1986the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **TZEWAN WONG**Age **28** **HONG KONG**  
(State)Groom's  
Residence **3001 S. HANOVER STREET**Marital Status **SINGLE**Bride's  
Name **ALICE LY**Age **22** Birthplace **VIETNAM**  
(State)Bride's  
Residence **3001 S. HANOVER STREET**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 9, 86****DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 9 1986****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38583

State of Maryland

LICENSE NO.  
136554

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL V. GRECO**Age **31**Birthplace **MASS.**  
(State)Groom's Residence **1515 WOODRIDGE LA. CARROLL CO., MD.**Marital Status **SINGLE**Bride's Name **DONNA M. CHERNETSKY**Age **26**Birthplace **PA.**  
(State)Bride's Residence **1515 WOODRIDGE LA. CARROLL CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

License Date

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

35.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38584

LICENSE NO.  
 137242

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 9TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name EDWARD E. SAUL  
 Groom's Residence 4225 SHAMROCK AVE.  
 Bride's Name LESLIE D. OWENS  
 Bride's Residence 4225 SHAMROCK AVE.

Age 40 Birthplace MD.  
(State)  
 Marital Status DIVORCED  
 Age 31 Birthplace MD.  
(State)  
 Marital Status SINGLE

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 9 86

DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 9 1986

License Fee \$       

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38585

LICENSE NO.  
 137237

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 9TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>JAMES FRANCIS FONTZ</b>	Age	<b>26</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>1201 CLEVELAND STREET.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>MICHELE DIANE MANALANSAN</b>	Age	<b>26</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>1201 CLEVELAND STREET.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any

**NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 9 86**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 10 1986**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 35

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38586

LICENSE NO.  
 137209

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT E. CRITZER**

Age **34** Birthplace **MD.**

Groom's Residence **5 BABY BIRD CT., BALTO.CO.,MD.**

(State)  
**DIVORCED**

Bride's Name **REGINA A. LINDSLEY**

Age **27** Birthplace **N.Y.**

Bride's Residence **5 BABY BIRD CT., BALTO.CO.,MD.**

(State)  
**DIVORCED**

Marital Status

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10TH 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 10 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38587

LICENSE NO.  
 137268

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH. day of OCTOBER / 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LEO M. COOMBS, JR.**

Age **23** Birthplace **MD.**  
(State)

Groom's Residence **3608 BROOKLYN AVE.**

Marital Status **SINGLE**

Bride's Name **WENDY M. LIBERTINO**

Age **17** Birthplace **MD.**  
(State)

Bride's Residence **3608 BROOKLYN AVE.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10, 86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 1 0 1986**

License Fee \$ 35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38588

LICENSE NO.  
 137193

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **LEONARD MASON**

Age **31** Birthplace **MD.**  
(State)

Groom's  
 Residence **2032 WALBROOK AVENUE**

Marital Status **SINGLE**

Bride's  
 Name **LYNETTE YVONNE SYKES**

Age **27** Birthplace **MD.**  
(State)

Bride's  
 Residence **2032 WALBROOK AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10TH 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 1 0 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35.70

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38589

LICENSE NO.  
 137230

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10 day of OCT 9 19 86

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	PAUL A. STURGILL	Age	24	Birthplace	MD.
				(State)	
Groom's Residence	926 STOLL ST.	Marital Status	SINGLE		
Bride's Name	JANICE A. LEWIS	Age	24	Birthplace	MD.
				(State)	
Bride's Residence	926 STOLL ST.	Marital Status	SINGLE		

Relationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date OCT 10 86

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38590

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137196

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH day of OCTOBER 7 19 86

**BALTIMORE CITY**

the following persons were by me united in marriage at \_\_\_\_\_  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>CHARLES W SISCO SKY</b>	Age	<b>23</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>1905 HAMMONDS FERRY RD BALTO CO MD</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>TRACIE J JOHNSON</b>	Age	<b>21</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>1905 HAMMONDS FERRY RD BALTO CO MD</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

*Joan Anderson*

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10 86** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

**TT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 1 0 1986**

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 35<sup>00</sup>

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38591

LICENSE NO.  
137041

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name EDWARD J. LUCAS, JR. Age 30 Birthplace MD.  
(State)  
Groom's Residence 1906 TOWSON AVE., BALTO.CO., MD. Marital Status DIVORCED  
Bride's Name CATHERINE E. JOHNSON Age 42 Birthplace MD.  
(State)  
Bride's Residence 1906 TOWSON AVE., BALTO.CO., MD. Marital Status DIVORCED  
Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

License Date SEPT. 29 86

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 1 0 1986  
SAUNDRA E. BANKS, CLERK

License Fee \$ 35<sup>00</sup>

Signature — Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38592

LICENSE NO.  
 137062

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 10<sup>th</sup> day of Oct 19 86

the following persons were by me united in marriage at Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KEVIN S BROOKS**

Age **31** Birthplace **MD.**  
 (State)

Groom's Residence **1216 W LEXINGTON ST**

Marital Status **SINGLE**

Bride's Name **PATRICIA M ELVOID**

Age **30** Birthplace **MD.**  
 (State)

Bride's Residence **4904 CRENSHAW AVE**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

License Date **SEPT 29 86**

JW

John F. Wankmull  
 Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
 Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-10-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38593

LICENSE NO.  
136785

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MONTIQUE H. GROSS

Age 25 Birthplace MD.  
(State)

Groom's Residence 1027 S. HANOVER STREET

Marital Status SINGLE

Bride's Name DARLENE CORBIN

Age 30 Birthplace MD.  
(State)

Bride's Residence 1027 S. HANOVER STREET

Marital Status SINGLE

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date SEPT. 23rd 86

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 1 0 1986

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

84

RESCUE :

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2

*Certificate of Marriage*  
*State of Maryland*

86-38594

LICENSE NO.  
 137304

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH. day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EUGENE DEBBS HELMBRIGHT**

Age **76** Birthplace **W. VA.**  
(State)

Groom's Residence **3604 WHITE AVENUE**

Marital Status **DIVORCED**

Bride's Name **MIREILLE PROVINCE**

Age **60** Birthplace **FRANCE**  
(State)

Bride's Residence **3604 WHITE AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10,**

**86**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 10 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38595

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137250

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GEORGE J BRENICK 3RD**  
Groom's Residence **1101 ST PAUL STREET**  
Bride's Name **NANCY F HALL**  
Bride's Residence **1101 ST PAUL STREET**

Age **38** Birthplace **PA.**  
(State)  
Marital Status **DIVORCED**  
Age **39** Birthplace **OHIO**  
(State)  
Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

License Date **OCT 10 86**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 10 1986**  
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35.00

JW

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38596

LICENSE NO.  
136884

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10 day of OCT 7 19 86

the following persons were by me united in marriage at BALTO  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ARNOLD HENDERSON**

Age **24** Birthplace **MD.**  
(State)

Groom's  
Residence **1108 W. FAYETTE STREET**

Marital Status **SINGLE**

Bride's  
Name **VALERIE JEAN KNIGHT**

Age **21** Birthplace **MD.**  
(State)

Bride's  
Residence **1108 W. FAYETTE STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 10 86**

Title and Religious Denomination or Office

**JW**

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 10 1986**

License Fee \$ 35.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38597

LICENSE NO.  
136940

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH. day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT WILLIS DIXON**  
Groom's Residence **1739 PATAPSCO STREET.**  
Bride's Name **ROXANN MARIE GUTHRIE**  
Bride's Residence **1739 PATAPSCO STREET.**

Age **29** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**  
Age **21** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35<sup>00</sup>

**OCT 1 0 1986**  
**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38598

## State of Maryland

LICENSE NO.

137184

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 8TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LAWSON H ATKINS**

Age **29** Birthplace **JAMAICA**  
(State)

Groom's Residence **5225 REISTERSTOWN RD**

Marital Status **DIVORCED**

Bride's Name **IVOLIN DAVY**

Age **26** Birthplace **JAMAICA**  
(State)

Bride's Residence **5225 REISTERSTOWN RD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 7 86**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 8 1986**

License Fee \$

**35****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-33599

LICENSE NO.  
136862

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 5th day of Oct 19 86

the following persons were by me united in marriage at Balt. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DANIEL WILLIAM MULLIGAN** Age **25** Birthplace **MD.**  
(State)  
Groom's Residence **345 S. FURROW STREET** Marital Status **SINGLE**  
Bride's Name **ANGELA LOUISE KING** Age **15** Birthplace **MD.**  
(State)  
Bride's Residence **345 S. FURROW STREET** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

J. T. Wankam  
Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 23rd 86** Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-8-86

License Fee \$ 35.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

86-38600

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
136669

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 9 day of Oct 1986

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT ALAN APPELBAUM** Age **31** Birthplace **VA.**  
(State)

Groom's Residence **22 GREENMEADOW DR. BALTO. CO., MD** Marital Status **SINGLE**

Bride's Name **SHEREE YVONNE BLACK** Age **30** Birthplace **MD.**  
(State)

Bride's Residence **22 GREENMEADOW DR. BALTO. CO., MD** Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **SEPT 17 86**

John F. Wankersmith  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-9-86

License Fee \$ 50

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court





2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38601

LICENSE NO.  
137121

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES H MOORE**  
Groom's Residence **2069 ROCKROSE AVE**

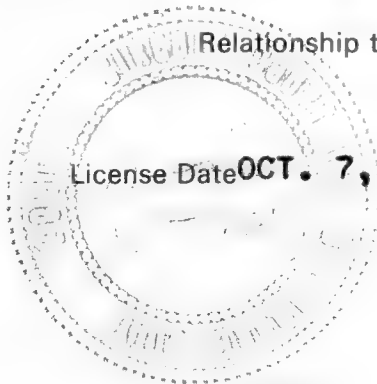
Age **37** Birthplace **PA.**  
(State)  
Marital Status **DIVORCED**

Bride's Name **ANNA L MILLER**  
Bride's Residence **2069 ROCKROSE AVE**

Age **45** Birthplace **MD.**  
(State)  
Marital Status **DIVORCED**

Relationship to groom if any

**NONE**



License Date **OCT. 7,**

**86**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 7 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$

**35.00**



2

## Certificate of Marriage

86-38602

State of Maryland

LICENSE NO.

136386

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7TH. day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name JAMES BEVERLY WYNN, JR.Age 35 Birthplace NEW YORK

(State)

Groom's

Residence 600 E. 30th STREETMarital Status SINGLE

Bride's

Name EDITH DENISE PITTMANAge 31 Birthplace NEW YORK

(State)

Bride's

Residence 2118 E. FEDERAL STREETMarital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date SEPT. 3,86DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 7 1986

License Fee \$

35.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38603

LICENSE NO.  
 136349

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7TH. day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ANTHONY J. WRIGHT</b>	Age	<b>28</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>4000 BOARMAN AVE.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>ANDREA A. DORSEY</b>	Age	<b>26</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>4000 BOARMAN AVE.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any		<b>NONE</b>			

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **AUG 28**

**86 DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

**JW**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 7 1986**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 35.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38604

State of Maryland

LICENSE NO.

136958

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7TH day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name LAWRENCE E. BERGERAge 32 Birthplace MD.  
(State)Groom's  
Residence 3101 SOUTHERN AVE.Marital Status DIVORCEDBride's  
Name NICOLE C. NEISESAge 26 Birthplace CALIF.  
(State)Bride's  
Residence 3101 SOUTHERN AVE.Marital Status SINGLERelationship to groom if any NONEJOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date OCT. 7 86DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 7 1986

License Fee \$

35<sup>00</sup>AMINDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38605

LICENSE NO.  
 136439

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 8TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **DEAN ALLEN ZORNES**  
 Groom's  
 Residence **1106 CARROLL STREET.**  
 Bride's  
 Name **TINA MARIE ROSE**  
 Bride's  
 Residence **506 CALLENDER STREET.**

Age **26** Birthplace **KY.**  
(State)  
 Marital Status **SINGLE**  
 Age **27** Birthplace **MD.**  
(State)  
 Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 8 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **SEPT. 8th 86**

License Fee \$ **35.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

TWO THIRTY - 1947

2

*Certificate of Marriage*  
*State of Maryland*

80-30696

LICENSE NO.  
 137197

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 8TH. day of OCTOBER 9 1986

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ALEXANDER Z. LEVIT Age 52 Birthplace RUSSIA  
 (State)  
 Groom's Residence 3 SUN TOP CT., BALTO.CO., MD. Marital Status DIVORCED  
 Bride's Name PATRICIA L. PIVEC Age 35 Birthplace MD.  
 (State)  
 Bride's Residence 312 APT. D GARDEN RD., BALTO.CO., MD. Marital Status DIVORCED  
 Relationship to groom if any NONE

License Date OCT. 8,

86 DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 8 1986

License Fee \$ 35

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38607

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137378

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ALFREDO ELDRIDGE COLEMAN, SR**

Age **21** Birthplace **VA.**  
(State)

Groom's Residence **913 WHITELOCK STREET**

Marital Status **SINGLE**

Bride's Name **BRENDA OLIVIA SAUNDERS**

Age **21** Birthplace **VA.**  
(State)

Bride's Residence **1540 MC KEAN AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 20TH 86**

**DEPUTY CLERK-CIRCUIT COURT**  
Name of Groom's Officiating Court Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 20 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 55

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38608

## Certificate of Marriage

State of Maryland

LICENSE NO.

137225

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby <sup>88</sup>Certify that on the 20TH. day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTONIO B. FERNANDO** Age **34** Birthplace **PHILIPPINES**  
 (State)  
 Groom's Residence **5106 CLIFFORD RD. BALTO. CO., MD.** Marital Status **SINGLE**  
 Bride's Name **AIDA G. ALEJANDRO** Age **27** Birthplace **PHILIPPINES**  
 (State)  
 Bride's Residence **3 VAN DYKE CT. BALTO. CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 14 86****DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35<sup>00</sup>**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

REPORT

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This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38609

LICENSE NO.  
136823

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CLABON D. MCCULLERS**

Age **40** Birthplace **MD.**  
(State)

Groom's Residence **208 N. CAREY STREET.**

Marital Status **DIVORCED**

Bride's Name **PENNY JOHNSON**

Age **29** Birthplace **MD.**  
(State)

Bride's Residence **208 N. CAREY STREET.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

License Date **SEPT. 19 86**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 20 1986**  
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 55.00

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2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38610

LICENSE NO.  
136771

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY LEE BENNETT**

Age **21** Birthplace **MD.**  
(State)

Groom's Residence **4915 WILBUR AVENUE**

Marital Status **SINGLE**

Bride's Name **MELISSA PAULETTE WOLF**

Age **19** Birthplace **MD.**  
(State)

Bride's Residence **4915 WILBUR AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 24th 86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 20 1986**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 35<sup>00</sup>

Signature — Clerk of the Court



2

86-38611

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137375

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH. day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GERALD E. BEMRICK** Age **23** Birthplace **MD.**  
(State)  
Groom's Residence **5108 WASENA AVE. A.A.CO., MD.** Marital Status **DIVORCED**  
Bride's Name **LINDA L. MALLORY** Age **18** Birthplace **MD.**  
(State)  
Bride's Residence **5108 WASENA AVE. A.A.CO., MD.** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

License Date **OCT. 20,**

**86** **DEPUTY CLERK- CIRCUIT COURT**  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer  
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 20 1986**

License Fee \$ 50

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38612

State of Maryland

LICENSE NO.

137328

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17TH day of OCTOBER 1986the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

GEORGE F O'CONNOR

Age 40

Birthplace

MD.  
(State)

Groom's

Residence

3411 FOSTER AVE

Marital Status

DIVORCED

Bride's

Name

DIANE S WARNER

Age 38

Birthplace

CONN  
(State)

Bride's

Residence

3411 FOSTER AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN

C.

ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 17, 86DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 17 1986

License Fee \$

35.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





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This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38613

LICENSE NO.  
137037

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH. day of OCTOBER 7 1986  
**BALTIMORE, MD.**

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>DOUGLAS W. GOLDMAN, SR.</b>	Age	<b>40</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>2520 ASHLAND AVE.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>BARBARA A. LOFTON</b>	Age	<b>39</b>	Birthplace	<b>VA.</b>
				(State)	
Bride's Residence	<b>2520 ASHLAND AVE.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

License Date

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 17 1986**

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38614

LICENSE NO.  
137397

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17<sup>th</sup> day of October 1986

the following persons were by me united in marriage at Baltimore, MD.  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LEONID ZAJCEVSKI JR**

Age **25** Birthplace **MD.**  
(State)

Groom's Residence **439 N CLINTON ST**

Marital Status **SINGLE**

Bride's Name **BETTY J LAMONTE**

Age **25** Birthplace **MD.**  
(State)

Bride's Residence **2939 MC ELDERRY ST**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT 16 86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this  
office on **OCT 17 1986**

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38615

State of Maryland

LICENSE NO.

137317

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17 day of OCT 9 19 86the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DAVID J BROWN

Age 35

Birthplace

N Y

(State)

Groom's  
Residence

603 ST DUNSTANS RD

Marital Status

DIVORCED

Bride's  
Name

THERESE A FORNEY

Age 30

Birthplace

MD.

(State)

Bride's  
Residence

3206 HEARTHSTONE RD

Marital Status

DIVORCED

Relationship to groom if any

NONE

PATRICIA M. BERTORELLI

Name of Officiating Clergy or Authorized Officer

License Date OCT 17 86

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

OCT 17 1986

License Fee \$

35

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

26-38616

LICENSE NO.  
 137388

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21st day of OCTOBER 9 1986

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>RUSSELL A. HANNER</b>	Age	<b>25</b>	Birthplace	<b>MD.</b>
				<small>(State)</small>	
Groom's Residence	<b>3609 BROOKLYN AVE. APT. 1</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>JANICE L. FOX</b>	Age	<b>27</b>	Birthplace	<b>MD.</b>
				<small>(State)</small>	
Bride's Residence	<b>3609 BROOKLYN AVE. APT. 1</b>	Marital Status	<b>DIVORCED</b>		

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

**DEP. CLK. CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 21 1986**

License Fee \$ 50

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

86-38617  
*Certificate of Marriage*

*State of Maryland*

LICENSE NO.

51793

Copy for State Department of Health and Mental Hygiene  
BALTIMORE CITY (30)

*I Hereby Certify* that on the 21 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ISAAC APPIAH**

Age **25** Birthplace **GHANA**  
(State)

Groom's Residence **2507 QUANTICO AVE**

Marital Status **SINGLE**

Bride's Name **LORRA L GAINES**

Age **22** Birthplace **MD.**  
(State)

Bride's Residence **1603 THOMAS AVE**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date

**OCT 21**

**86**

Name of Officiating Clergyman or Authorized Officer

Title and Religious Denomination or Office  
**DEPUTY CLERK CIRCUIT COURT**

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-21-86

License Fee - Resident \$  
Non-Resident \$

Signature-Clerk of the Court



2

## Certificate of Marriage

86-38618

State of Maryland

LICENSE NO.  
137438

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20<sup>th</sup> day of October 1986the following persons were by me united in marriage at Baltimore, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DERWIN M CLIFTON

Age 20 Birthplace MD.  
(State)Groom's  
Residence

1606 E 29TH ST

Marital Status SINGLEBride's  
Name

TJETTA P ANDERSON

Age 21 Birthplace MD.  
(State)Bride's  
Residence

1616 E 29TH ST

Marital Status SINGLE

Relationship to groom if any

NONELicense Date OCT 17 86

jw

Name of Officiating Clergy or Authorized Officer

Risa A. Humphreys  
Deputy Clerk - Circuit Court

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-20-86License Fee \$ 50**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38619

## Certificate of Marriage

State of Maryland

LICENSE NO.

136799

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20th day of Oct 1986

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **GARY M. HAINES**Age **31**Birthplace **NEW YORK**

(State)

Groom's

Residence **7807 WINBORNE DR. A.A. CO., MD.**Marital Status **SINGLE**

Bride's

Name **SUZANNE M. WHALEN**Age **22**Birthplace **MARYLAND**

(State)

Bride's

Residence **7807 WINBORNE DR. A.A. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 18****86**

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-20-86

License Fee \$

35<sup>00</sup>**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38620

LICENSE NO.  
 137473

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JUNIOR LOUIS MOE**

Age **28** Birthplace **TRINIDAD**  
(State)

Groom's Residence **2854 HARFORD ROAD.**

Marital Status **DIVORCED**

Bride's Name **KARLA YAMILETH AGUIRRE**

Age **21** Birthplace **DE HONDURAS**  
(State)

Bride's Residence **9119 MANCHESTER RD. MONT.CO., MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 20 86**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

**TT**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 20 1986**

License Fee \$ 35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

State of Maryland

86-38621

LICENSE NO.  
137074

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 20TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE., MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>JAMES HENRY THORNE</b>	Age	<b>23</b>	Birthplace	<b>N. CAR.</b> (State)
Groom's Residence	<b>11 CRAVEN COURT, BALTO.CO.,MD.</b>				
Bride's Name	<b>ALICE LAVERN SQUIRREL</b>	Age	<b>23</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>1234 ARGYLE AVE.</b>				
Relationship to groom if any	<b>NONE</b>				
	<b>BARBARA J. PITT</b>				
	Name of Officiating Clergy or Authorized Officer				
License Date	<b>OCT 3 86</b>	<b>DEPUTY CLERK- IRCUIT COURT</b>			
	Title and Religious Denomination or Office				
	Address of Clergy or Authorized Officer				
	CERTIFICATION OF CLERK OF THE COURT				
	I hereby certify that the above is a true copy of a record filed in this				
	office on <b>OCT 20 1986</b>				
	<b>SAUNDRA E. BANKS, CLERK</b>				
	Signature - Clerk of the Court				

License Fee \$ 35<sup>00</sup>

JW

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38622

LICENSE NO.  
 137373

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH. day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD A. MANGUM** Age **18** Birthplace **MD.**  
(State)  
 Groom's Residence **314 TOWSON AVE. A.A.CO., MD** Marital Status **SINGLE**  
 Bride's Name **NICOLE R. RE** Age **16** Birthplace **MD.**  
(State)  
 Bride's Residence **305 17TH AVENUE A.A.CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 17,**

**86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 17 1986**

License Fee \$ 32

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

88-38623

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137420

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ARTHUR S. WHITE, SR.</b>	Age	<b>48</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>1517 BURNWOOD RD.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>NEVIE M. MONTGOMERY</b>	Age	<b>39</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>1517 BURNWOOD RD.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any		<b>NONE</b>			

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 17 86**

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38624

LICENSE NO.  
 137426

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>FRANK C. ZURICK</b>	Age	<b>32</b>	Birthplace	<b>MD.</b>
				<small>(State)</small>	
Groom's Residence	<b>3322 FLEET ST.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>BARBARA L. MC PEAK</b>	Age	<b>27</b>	Birthplace	<b>MD.</b>
				<small>(State)</small>	
Bride's Residence	<b>3322 FLEET ST.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 17, 86** **DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 17 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38625

LICENSE NO.  
 137199

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17<sup>th</sup> day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **H. C. FERGUSON**

Age **36** Birthplace **MISSISSIPPI**  
 (State)

Groom's Residence **208 N. MOUNT STREET**

Marital Status **DIVORCED**

Bride's Name **LINDA L. BELFORD**

Age **25** Birthplace **MARYLAND**  
 (State)

Bride's Residence **208 N. MOUNT STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

Barbara Pitt

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 6TH**

86

Deputy Clerk Court Court

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-17-86

License Fee \$

35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38626

LICENSE NO.  
 135527

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17 day of Oct 9, 1986

the following persons were by me united in marriage at

Balti Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM G. LEE**  
 Groom's Residence **1206 DARLEY AVE**  
 Bride's Name **MARIA M. CLARK**  
 Bride's Residence **1206 DARLEY AVE**

Age **31** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**  
 Age **28** Birthplace **MD.**  
 (State)  
 Marital Status **SINGLE**

Relationship to groom if any **NONE**

Barbara Pitt

Name of Officiating Clergy or Authorized Officer

License Date **JULY 25 86**

Deputy Clerk Circuit Court  
 Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-17-86

License Fee \$ 25

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

tt



2

*Certificate of Marriage*  
*State of Maryland*

86-38627

LICENSE NO.  
 137383

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17<sup>th</sup> day of October 1986

the following persons were by me united in marriage at Baltimore md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **YADEROW STEWART**  
 Groom's Residence **3804 OLD YORK RD**  
 Bride's Name **TONIA V BELL**  
 Bride's Residence **2229 E BIDDLE ST**

Age **26** Birthplace **MICH**  
(State)  
 Marital Status **SINGLE**  
 Age **21** Birthplace **N Y**  
(State)  
 Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 16** **86**

TT

John Wankmiller  
Name of Officiating Clergy or Authorized Officer  
Deputy Clerk - Circuit Court  
Title and Religious Denomination or Office  
100 N. Calvert St.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 17 1986**

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38628

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137342

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH. day of OCTOBER 9 1986

**BALTIMORE, MD.**

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EMANUEL F HEARD** Age **36** Birthplace **WASH DC**  
(State)  
Groom's Residence **15 WALDEN POPLAR CT BALTO CO MD** Marital Status **SINGLE**  
Bride's Name **BLANCHE D POOLE** Age **35** Birthplace **WASH DC**  
(State)  
Bride's Residence **15 WALDEN POPLAR CT BALTO CO MD** Marital Status **DIVORCED**  
Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 14 86** **DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

**TT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35.00

**OCT 17 1986**  
**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38629

LICENSE NO.  
 135808

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	DERBY EVANS	Age	44	Birthplace	MD.
				(State)	
Groom's Residence	240 S HERRING CT	Marital Status	DIVORCED		
Bride's Name	DEBORAH A TIMMONS	Age	24	Birthplace	MD.
				(State)	
Bride's Residence	295 HERRING CT	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT 17 19 86

JW

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 17 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38630

LICENSE NO.  
 137252

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17th day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **RUSSELL WIMBISH**Age **23** Birthplace **MD.**

(State)

Groom's

Residence **8343 CHURCH LN. BALTO.CO.,MD.**Marital Status **SINGLE**

Bride's

Name **PAMELA ANN AVERETTE**Age **21** Birthplace **MD.**

(State)

Bride's

Residence **8343 CHURCH LN. BALTO.CO.,MD**

Marital Status

Relationship to groom if any **NONE**

*Barbara Ann Pitt*

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 17th 86****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 17 1986**

License Fee \$

**35.00****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38631

State of Maryland

LICENSE NO.

137360

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16TH. day of OCTOBER 1986the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **JAMES TARLTON CHASE**Age **50** Birthplace **MD.**  
(State)Groom's  
Residence **2305 REISTERTOWN ROAD**Marital Status **DIVORCED**Bride's  
Name **MARGARET ELAINE JOHNSON**Age **21** Birthplace **MD.**  
(State)Bride's  
Residence **3445 SPELMAN ROAD**Marital Status **SINGLE**Relationship to groom if any **NONE**JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 16,****86**DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

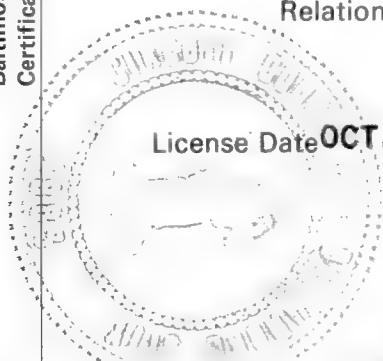
I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 16 1986****SAUNDRA E. BANKS, CLERK**License Fee \$ 3.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38632

LICENSE NO.  
 137270

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 16TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM JOSEPH O'BRIEN JR.** Age **33** Birthplace **MD.**  
(State)  
 Groom's Residence **5739 HAZELWOOD CIRCLE.** Marital Status **DIVORCED**  
 Bride's Name **LYNN MARIE BLUEFORD** Age **31** Birthplace **MD.**  
(State)  
 Bride's Residence **5739 HAZELWOOD CIRCLE.** Marital Status **DIVORCED**  
 Relationship to groom if any **NONE**

License Date **OCT. 16,**

**86** **JOAN C. ANDERSON**  
Name of Officiating Clergy or Authorized Officer  
**DEPUTY CLERK- CIRCUIT COURT**  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer  
 CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 16 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38633

LICENSE NO.  
137104

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 1ST. day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>MICHAEL J. PARK</b>	Age	<b>33</b>	Birthplace	<b>N.J.</b> <small>(State)</small>
Groom's Residence	<b>705 BERRY ST.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>CATHERINE A. GREAYER</b>	Age	<b>30</b>	Birthplace	<b>MD.</b> <small>(State)</small>
Bride's Residence	<b>705 BERRY ST.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 1, 86**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

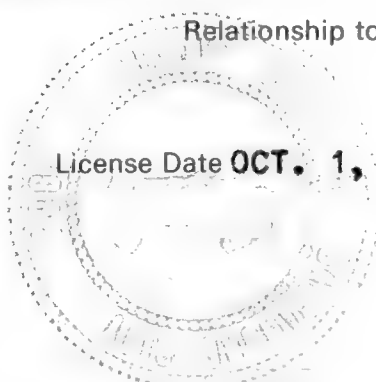
**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 1 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ **35<sup>00</sup>**



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38634

LICENSE NO.  
136984

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 1ST. day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ANTON WILLIAM WETZEL Age 20 Birthplace MD.

Groom's Residence 7443 EDSWORTH RD. BALTO.CO,MD Marital Status SINGLE

Bride's Name SUSAN CHRISTINE BROWN Age 20 Birthplace MD.  
(State)

Bride's Residence 7443 EDSWORTH RD. BALTO.,CO.,MD Marital Status SINGLE

Relationship to groom if any NONE

BARBARA J. PITT

Name of Officiating Clergy or Authorized Officer

86 DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 1 1986

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date OCT. 1,

86

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38635

LICENSE NO.  
 137141

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 2ND day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DANIEL L GREEN JR**  
 Groom's Residence **2724 E MONUMENT ST**  
 Bride's Name **MICHELLE D BROWN**  
 Bride's Residence **1700 E NORTH AVE**

Relationship to groom if any

Age 20 Birthplace MD.  
(State)  
 Marital Status SINGLE  
 Age 20 Birthplace FLA.  
(State)  
 Marital Status SINGLE  
NONE

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 2**

86

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on OCT 2 1986

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38636

LICENSE NO.  
 137117

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3rd day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JOHN ARTIS, JR. Age 37 Birthplace NEW JERSEY  
(State)  
 Groom's Residence 15 WALDEN OAK CT. BALTO. CO., MD. Marital Status DIVORCED  
 Bride's Name LAREN DENISE DAY Age 27 Birthplace MARYLAND  
(State)  
 Bride's Residence 15 WALDEN OAK CT. BALTO. CO., MD. Marital Status SINGLE  
 Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 3rd 86

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 3 1986

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38637

State of Maryland

LICENSE NO.

137057

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 3 day of Oct 1986the following persons were by me united in marriage at Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>TYRONE FLOWERS</b>	Age	<b>20</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>2230 E. MADISON ST.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>STARRA ELISA WHITE</b>	Age	<b>19</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>1705 E. LAFAYETTE AVE.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**License Date **SEPT. 29,****86**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on 10.3.86**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38638

LICENSE NO.  
 137143

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3 day of Oct 1986

the following persons were by me united in marriage at

Baltimore  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

CLAUDE T GALLIER

Age **50**

Birthplace

VA  
 (State)

Groom's  
 Residence

2507 N CHARLES ST

Marital Status

**DIVORCED**

Bride's  
 Name

CATHERINE A HYMAN

Age **27**

Birthplace

N Y  
 (State)

Bride's  
 Residence

620 E MAC PHAIL RD HARFORD CO MD

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date **OCT. 3**

86

Joan C. Anderson  
 Name of Officiating Clergy or Authorized Officer

Deputy Clerk Court  
 Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-3-86

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201; upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38639

LICENSE NO.  
 137100

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3RD day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **ROBERT LEROY BRANCH, 3RD.**Age **20** Birthplace **MD.**  
(State)

Groom's

Residence **350 BALLOU COURT.**Marital Status **SINGLE**

Bride's

Name **MARIE ANN TONEY**Age **22** Birthplace **MD.**  
(State)

Bride's

Residence **530 W. HOFFMAN STREET.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**Name of Officiating Clergy or Authorized OfficerLicense Date **OCT. 3 86** **DEP. CLK.-CIRCUIT COURT OF BALTO.CITY**Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 3 1986**License Fee \$ 35<sup>00</sup>**SAUNDRA E. BANKS, CLERK**Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

JOHN F. WANKMILLER

1000 N. 1st St. N. 1st St. N. 1st St.

2

# Certificate of Marriage

86-38640

## State of Maryland

 LICENSE NO.  
137112

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**
*I Hereby Certify* that on the 3RD day of OCTOBER 9 19 86

 the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **PHILLIP NATHANIEL STALLINGS** Age **31** Birthplace **WASH., D.C.**  
(State)

 Groom's Residence **2418- A BRIDGEHAMPTON DRIVE** Marital Status **SINGLE**

 Bride's Name **DEBORAH FAYE ADAMS** Age **27** Birthplace **N. CAROLINA**  
(State)

 Bride's Residence **2418- A BRIDGEHAMPTON DRIVE** Marital Status **SINGLE**

 Relationship to groom if any **NONE**
**JOAN C. ANDERSON**
Name of Officiating Clergy or Authorized Officer

 License Date **OCT. 2, 86** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**  
Title and Religious Denomination or Office
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

 office on **OCT 3 1986**  
**SAUNDRA E. BARRS, CLERK**

 License Fee \$ 35<sup>00</sup>
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 84

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Lichtenthal and Whistler (1973).

100



2

## Certificate of Marriage

86-38641

State of Maryland

LICENSE NO.

136796

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 3RD day of OCTOBER 19 86the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **DEWEY BRIAN HECTOR**Age **24**Birthplace **MD.**

(State)

Groom's

Residence **2204 W. LEXINGTON STREET**Marital Status **SINGLE**

Bride's

Name **DIANNE RENEE AITKEN**Age **22**Birthplace **MD.**

(State)

Bride's

Residence **2133 W. MULBERRY STREET**Marital Status **DIVORCED**Relationship to groom if any **NONE****RISA A. HUMPHRIES**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 3RD 86****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 3 - 1986**

License Fee \$

**35****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38642

LICENSE NO.  
 137030

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 8 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **WILLIAM ALBERT HOBBS**Age **40**

Birthplace

**MD.**(State)

Groom's

Residence **30 W. TALBOTT STREET.**

Marital Status

**DIVORCED**

Bride's

Name **ESTHER MAY BERRY**Age **38**

Birthplace

**MD.**(State)

Bride's

Residence **30 W. TALBOTT STREET.**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

License Date **OCT 3** **86**

**JW**

*[Signature]*  
 Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

Office on

10 3 86  
**SAUNDRA E. BANKS, CLERK**

License Fee \$

35

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38643

LICENSE NO.  
136453

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3RD day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MACKEL LOCKLEAR Age 29 Birthplace MD.  
(State)  
Groom's Residence 8272 AHEARN DR. A.A. CO., MD. Marital Status SINGLE  
Bride's Name RITA D. SERIO Age 29 Birthplace MD.  
(State)  
Bride's Residence 7996 G. SILENT WINDS CT. A.A. CO., MD. Marital Status SINGLE  
Relationship to groom if any NONE

License Date SEPT. 4TH 86

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ \_\_\_\_\_

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38644

## State of Maryland

 LICENSE NO.  
137078

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

 I Hereby Certify that on the 3 day of OCT 19 86

 the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                          |                |        |            |                        |
|-------------------|--------------------------|----------------|--------|------------|------------------------|
| Groom's Name      | BARRON DINO JONES        | Age            | 25     | Birthplace | S. CAR.                |
|                   |                          |                |        |            | <small>(State)</small> |
| Groom's Residence | 1806 BARCLEY ST.         | Marital Status | SINGLE |            |                        |
| Bride's Name      | DENISE ANTIONETTE TOWNES | Age            | 29     | Birthplace | MD.                    |
|                   |                          |                |        |            | <small>(State)</small> |
| Bride's Residence | 2003 N. MONROE ST.       | Marital Status | SINGLE |            |                        |

Relationship to groom if any

 NONE  
JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date OCT 3 1986

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 3 1986

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38645

LICENSE NO.  
 137200

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH. day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT J. ALLEN** Age **73** Birthplace **VA.**  
 (State)  
 Groom's Residence **135 BISHOP AVE., A.A. CO., MD.** Marital Status **SINGLE**  
 Bride's Name **LEAFY ANDERSON** Age **62** Birthplace **GA.**  
 (State)  
 Bride's Residence **135 BISHOP AVE., A.A. CO., MD.** Marital Status **WIDOW**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 6 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 6, 86**

License Fee \$

**35<sup>00</sup>**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38646

LICENSE NO.  
 137161

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3RD. day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN C. A. HARVIN, 3RD.** Age **19** Birthplace **MD.**  
(State)  
 Groom's Residence **9905 CERVINE LA. APT. 204, BALTO. CO., MD.** Marital Status **SINGLE**  
 Bride's Name **BARBARA P. HOLMES** Age **19** Birthplace **MD.**  
(State)  
 Bride's Residence **2904 OAKLEY AVE.** Marital Status **SINGLE**  
 Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 3, 86** **DEPT. CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 3 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

TTI .U

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage* 86-38647  
*State of Maryland*

LICENSE NO.  
137097

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3RD day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                             |                |        |            |                 |
|------------------------------|-----------------------------|----------------|--------|------------|-----------------|
| Groom's Name                 | KEVIN D. SMITH              | Age            | 24     | Birthplace | N.C.<br>(State) |
| Groom's Residence            | 2728 SPAULDING AVENUE.      | Marital Status | SINGLE |            |                 |
| Bride's Name                 | KATRINA YVETTE WEATHERSPOON | Age            | 21     | Birthplace | OHIO<br>(State) |
| Bride's Residence            | 2728 SPAULDING AVENUE       | Marital Status | SINGLE |            |                 |
| Relationship to groom if any | NONE                        |                |        |            |                 |

BARBARA J. PITT

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 3RD 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

100 N. CALVERT ST. 21202

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 3 1986**

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38648

LICENSE NO.  
137103

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 1ST day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                     |                |        |            |     |
|------------------------------|---------------------|----------------|--------|------------|-----|
| Groom's Name                 | MAURICE KEVIN SMITH | Age            | 25     | Birthplace | MD. |
| Groom's Residence            | 1305 LAKESIDE AVE.  | Marital Status | SINGLE |            |     |
| Bride's Name                 | DEBORAH ANN TAYLOR  | Age            | 23     | Birthplace | MD. |
| Bride's Residence            | 420 EAST 25TH. ST.  | Marital Status | SINGLE |            |     |
| Relationship to groom if any |                     | NONE           |        |            |     |

RISA A. HUMPHRIES

Name of Officiating Clergy or Authorized Officer

License Date OCT. 1 86

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 1 1986

License Fee \$ 35<sup>00</sup>

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court





2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38649

LICENSE NO.  
136735

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH. day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID STEWART KESSLER**

Age **26** Birthplace **MD.**  
(State)

Groom's Residence **109 N. EAST AVENUE**

Marital Status **SINGLE**

Bride's Name **CAROL ANN PUCETTI**

Age **30** Birthplace **MD.**  
(State)

Bride's Residence **109 N. EAST AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 18 86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 6 1986**

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court



2

## Certificate of Marriage

86-38650

State of Maryland

LICENSE NO.  
136602

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1ST. day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JAMES O. CLANTONAge 59 Birthplace N. CAR.  
(State)Groom's Residence 1728 N. BOND ST.Marital Status DIVORCEDBride's Name ARNEATHER STOKESAge 49 Birthplace MD.  
(State)Bride's Residence 1728 N. BOND ST.Marital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date SEPT. 11 86DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 1 1986

License Fee \$

35.00LAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38651

State of Maryland

LICENSE NO.  
137082

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1ST. day of OCTOBER 1986the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **JOSEPH EDWARDS**Age **86** Birthplace **MD.**  
(State)

Groom's

Residence **1805 E. LAFAYETTE AVE.**Marital Status **WIDOWER**

Bride's

Name **HATTIE M. KILLBFEY**Age **76** Birthplace **N. CAR.**  
(State)

Bride's

Residence **201 N. WASHINGTON ST. APT. 604**Marital Status **WIDOW**Relationship to groom if any **NONE**JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 1,****86****DEPT CLERK - CIRCUIT COURT**

Title and Religious Denomination of Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 1 1986****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38652

State of Maryland

LICENSE NO.

137215

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6TH day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH HENDERSON EVANS**Age **20** Birthplace **MARYLAND**  
(State)Groom's Residence **2006 W. LEXINGTON STREET**Marital Status **SINGLE**Bride's Name **MARY ANTOINETTE HOLMAN**Age **18** Birthplace **MARYLAND**  
(State)Bride's Residence **2006 W. LEXINGTON STREET**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 6****86****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 6 1986**

License Fee \$

**35<sup>00</sup>****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38653

LICENSE NO.  
136899

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                            |                |               |            |            |
|------------------------------|----------------------------|----------------|---------------|------------|------------|
| Groom's Name                 | <b>TYRENE J.W. JONES</b>   | Age            | <b>26</b>     | Birthplace | <b>MD.</b> |
|                              |                            |                |               | (State)    |            |
| Groom's Residence            | <b>1723 MT. PELIER ST.</b> | Marital Status | <b>SINGLE</b> |            |            |
| Bride's Name                 | <b>CAROLYN E. RICE</b>     | Age            | <b>23</b>     | Birthplace | <b>MD.</b> |
|                              |                            |                |               | (State)    |            |
| Bride's Residence            | <b>1727 MT. PELIER ST.</b> | Marital Status | <b>SINGLE</b> |            |            |
| Relationship to groom if any |                            | <b>NONE</b>    |               |            |            |

**RISA A. HUMPHRIES**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 6TH**

**86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 7 1986**

**SAUNDRA E. BANKS, CLERK**

License Fee \$ **35<sup>00</sup>**

Signature — Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38654

LICENSE NO.  
 136065

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                             |                |                 |            |            |
|-------------------|-----------------------------|----------------|-----------------|------------|------------|
| Groom's Name      | <b>MICHAEL L. JOHNSON</b>   | Age            | <b>34</b>       | Birthplace | <b>MD.</b> |
|                   |                             |                |                 | (State)    |            |
| Groom's Residence | <b>615 N. BRADFORD AVE.</b> | Marital Status | <b>DIVORCED</b> |            |            |
| Bride's Name      | <b>RHONDA L. ELDRIDGE</b>   | Age            | <b>27</b>       | Birthplace | <b>MD.</b> |
|                   |                             |                |                 | (State)    |            |
| Bride's Residence | <b>1409 GAY ST.</b>         | Marital Status | <b>SINGLE</b>   |            |            |

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **AUG. 18,**

**86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

**100 N. CALVERT ST. 21202**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

**OCT 7 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

Figure 1. The effect of the concentration of the *Agrobacterium* suspension on the transformation efficiency of *Agrobacterium* strains. The number of transformed cells was determined by the number of colonies obtained after 10 days of growth on the selective medium. The results are the mean of three independent experiments. Error bars represent the standard deviation.

701102

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2

*Certificate of Marriage*  
*State of Maryland*

86-38655

LICENSE NO.  
 137343

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 15TH. day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DANA DEAN DAVIS**

Age **41** Birthplace **MD.**  
(State)

Groom's Residence **3054 BERO RD. BALTO. CO., MD.**

Marital Status **DIVORCED**

Bride's Name **ROBIN RENEE MORGAN**

Age **29** Birthplace **MD.**  
(State)

Bride's Residence **3054 BERO RD. BALTO. CO., MD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 15, 86** **DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 15 1986**

License Fee \$ 35<sup>00</sup>

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38656

LICENSE NO.  
 137489

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22<sup>ND</sup> day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                            |                |        |            |                               |
|-------------------|----------------------------|----------------|--------|------------|-------------------------------|
| Groom's Name      | REGINALD JOSEPH SIMMS, JR. | Age            | 26     | Birthplace | MD.<br><small>(State)</small> |
| Groom's Residence | 5205 CEDGATE ROAD          | Marital Status | SINGLE |            |                               |
| Bride's Name      | SHEILA DENISE SIMPSON      | Age            | 25     | Birthplace | MD.<br><small>(State)</small> |
| Bride's Residence | 5205 CEDGATE ROAD          | Marital Status | SINGLE |            |                               |

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 22 86 DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 22 1986

License Fee \$ 50

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

TT





2

*Certificate of Marriage*  
*State of Maryland*

86-38657

LICENSE NO.  
137496

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22ND day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BRYAN WARREN COOPER** Age **21** Birthplace **MD.**  
(State)  
Groom's Residence **1719 GWYNNNSFALLS PKWY.** Marital Status **SINGLE**  
Bride's Name **VERA WALSTON** Age **28** Birthplace **MD.**  
(State)  
Bride's Residence **8618 BRAMBLE LN. BALTO.CO.,MD** Marital Status **SINGLE**  
Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 22 86** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**  
Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 22 1986**

License Fee \$ 30

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38658

State of Maryland

LICENSE NO.  
137308

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 15TH day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JUNIOUS G CLANTON**  
 Groom's Residence **3920 W GARRISON AVE**  
 Bride's Name **THELMA L BARNES**  
 Bride's Residence **3920 W GARRISON AVE**

Age **66** Birthplace **MD.**  
 (State)  
 Marital Status **DIVORCED**  
 Age **56** Birthplace **S CAR**  
 (State)  
 Marital Status **WIDOW**  
**NONE**

Relationship to groom if any

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 15 86****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 15 1986**

License Fee \$

**35****SAUNDRA E. BANKS CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38659

LICENSE NO.  
136521

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 2ND day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TYRONE SCOTT MC GRIFF**

Age **22** Birthplace **CONN.**  
(State)

Groom's Residence **1932 E. 28TH STREET.**

Marital Status **SINGLE**

Bride's Name **ROSALIE BASDEN**

Age **24** Birthplace **N.Y.**  
(State)

Bride's Residence **2913 THORNDAL ROAD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 8th** **86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$           

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38660

LICENSE NO.  
 137355

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21ST day of OCTOBER 9 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                               |                |                 |            |            |
|-------------------|-------------------------------|----------------|-----------------|------------|------------|
| Groom's Name      | <b>WESLEY J. HURST</b>        | Age            | <b>42</b>       | Birthplace | <b>MD.</b> |
| Groom's Residence | <b>2228 MT. ROYAL TERRACE</b> | Marital Status | <b>DIVORCED</b> |            |            |
| Bride's Name      | <b>CELESTINE R. CARLYLE</b>   | Age            | <b>32</b>       | Birthplace | <b>GA.</b> |
| Bride's Residence | <b>2228 MT. ROYAL TERRACE</b> | Marital Status | <b>SINGLE</b>   |            |            |

Relationship to groom if any **NONE**

**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 16TH 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 21 1986**

License Fee \$ 3.50

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38661

LICENSE NO.  
 137481

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                                  |                |        |            |                                |
|-------------------|----------------------------------|----------------|--------|------------|--------------------------------|
| Groom's Name      | MARVI R. WISE                    | Age            | 22     | Birthplace | MD.<br><small>(State)</small>  |
| Groom's Residence | 3317 COURTLEIGH DR. BALTO.CO.,MD | Marital Status | SINGLE |            |                                |
| Bride's Name      | PHYLLIS GROMES                   | Age            | 28     | Birthplace | N.Y.<br><small>(State)</small> |
| Bride's Residence | 2907 W. BELVEDERE AVE.           | Marital Status | SINGLE |            |                                |

Relationship to groom if any NONE

**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date OCT 21 86

JW

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 21 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 2.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38662

LICENSE NO.  
 137321

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21<sup>st</sup> day of Oct. 9 19 86

the following persons were by me united in marriage at Baltimore, Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**WENDELL UYLESSES EPPS**

Age **27** Birthplace **MD.**  
 (State)

Groom's  
 Residence

**1515 POPLAR GROVE STREET.**

Marital Status **SINGLE**

Bride's  
 Name

**CYNTHIA DORIA DORSEY**

Age **27** Birthplace **MD.**  
 (State)

Bride's  
 Residence

**1515 POPLAR GROVE STREET.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**RISA A. HUMPHRIES**

Name of Officiating Clergy or Authorized Officer

**86 DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

**JW**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 21 1986

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT 16**

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

201

2

# Certificate of Marriage

86-38663

## State of Maryland

 LICENSE NO.  
136702

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**
*I Hereby Certify* that on the 21ST. day of OCTOBER 1986

 the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **VERNON FRANK MITCHELL**

 Age **39** Birthplace **MD.**  
(State)

 Groom's Residence **819 S. PONCA STREET**

 Marital Status **DIVORCED**

 Bride's Name **LORINA SUSAN ARNOLD**

 Age **18** Birthplace **W. VA.**  
(State)

 Bride's Residence **819 S. PONCA STREET**

 Marital Status **SINGLE**

 Relationship to groom if any **NONE**

 License Date **OCT. 21,**

86

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 21 1986**

 License Fee \$ 30
**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38664

LICENSE NO.  
136852

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 21ST. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES MORITZ FOSTER**

Age **25** Birthplace **KANSAS**  
(State)

Groom's Residence **2615 W. COLD SPRING LANE**

Marital Status **SINGLE**

Bride's Name **DOROTHY REGINA CARROLL**

Age **28** Birthplace **MARYLAND**  
(State)

Bride's Residence **2615 W. COLD SPRING LANE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 22**

**86 DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 21 1986**

License Fee \$

**35**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38665

LICENSE NO.  
 136756

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 1st day of October 1986

the following persons were by me united in marriage at Baltimore Md  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES ROLAND ALLEN**

Age **32** Birthplace **VA.**  
 (State)

Groom's Residence **6 BRUBAR COURT**

Marital Status **SINGLE**

Bride's Name **SERITA MICHELLE LOVITT**

Age **25** Birthplace **MD.**  
 (State)

Bride's Residence **6 BRUBAR COURT**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **SEPT. 17 86**

Barbara Fied  
 Name of Officiating Clergy or Authorized Officer

Deputy Clerk - Circuit Court.  
 Title and Religious Denomination or Office

100 N. Calvert St - 21202  
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 1 1986**

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38666

State of Maryland

LICENSE NO.  
137414

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17TH day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name GARY L HOLLAND  
Groom's  
Residence 405 E LAFAYETTE AVE  
Bride's  
Name DONNA S JONES  
Bride's  
Residence 405 E LAFAYETTE AVE

Age 20 Birthplace MD.  
(State)  
Marital Status SINGLE  
Age 18 Birthplace MD  
(State)  
Marital Status SINGLE  
NONE

Relationship to groom if any

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date OCT. 17 86DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is an original of a record filed in this  
office on OCT 17 1986License Fee \$ 50SAUNDRA E. BANKS, CLERK  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38667

LICENSE NO.  
137476

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22 day of OCT 9 19 86

**BALTO MD**

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**STEVEN SINGER**

Age **31**

Birthplace **N Y**  
(State)

Groom's  
Residence

**27 BYWAY SOUTH BALTO CO MD**

Marital Status **SINGLE**

Bride's  
Name

**TINA M DUNCAN**

Age **24**

Birthplace **N J**  
(State)

Bride's  
Residence

**27 BYWAY SOUTH BALTO CO MD**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **8 OCT 22 86**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 22 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 55<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38668

LICENSE NO.  
137522

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JULIAN CHIMEZIE IBEAWUCHI**

Age **29** Birthplace **NIGERIA**  
(State)

Groom's Residence **106 SUNMAR COURT**

Marital Status **SINGLE**

Bride's Name **COLLEEN RENEE RANDALL**

Age **22** Birthplace **MARYLAND**  
(State)

Bride's Residence **106 SUNMAR COURT**

Marital Status **SINGLE**

Relationship to groom if any

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 24 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 24,**

**86**

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38669

State of Maryland

LICENSE NO.

137469

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24TH day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LARRY G. ALEXANDER

Age 37 Birthplace MD.  
(State)Groom's  
Residence

1925 HILLENWOOD ROAD

Marital Status DIVORCEDBride's  
Name

PHYLLIS W. HEMPHILL

Age 36 Birthplace MD.  
(State)

Bride's

Residence

1925 HILLENWOOD ROAD

Marital Status DIVORCED

Relationship to groom if any

NONE

License Date OCT. 24TH 86Barbara J. Pitt  
Name of Officiating Clergy or Authorized OfficerDEPUTY CLERK-CIRCUIT COURT  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 24 1986SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 5.50

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38670

LICENSE NO.  
137494

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23RD day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WILEY MARK HILL

Age 48 Birthplace S. C.  
(State)

Groom's Residence 920 N. CALVERT STREET

Marital Status DIVORCED

Bride's Name LESLIE MAUREEN YOES

Age 41 Birthplace MD.  
(State)

Bride's Residence 920 N. CALVERT STREET

Marital Status DIVORCED

Relationship to groom if any NONE

RISA A. HUMPHRIES

Name of Officiating Clergy or Authorized Officer

License Date OCT. 23 86 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 23 1986

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38671

LICENSE NO.  
 137509

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23RD day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM MC KINLEY CLARK**

Age **40** Birthplace **MD.**  
(State)

Groom's Residence **2216 BRYANT AVENUE**

Marital Status **DIVORCED**

Bride's Name **SHEILA DENISE BATTLE**

Age **23** Birthplace **N.C.**  
(State)

Bride's Residence **2216 BRYANT AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 23RD 86**

**DEPUTY CLERK & CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 23 1986**

License Fee \$ 5.50

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38672

LICENSE NO.  
 137461

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23RD day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS FRANKLIN MATTHEWS, JR**

Age **24** Birthplace **MD.**  
 (State)

Groom's Residence **3626 KESWICK ROAD.**

Marital Status **DIVORCED**

Bride's Name **KAREN EMMA BLAKE**

Age **29** Birthplace **MD.**  
 (State)

Bride's Residence **3626 KESWICK ROAD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 23RD 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 23 1986**

License Fee \$ 35.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38673

LICENSE NO.  
 137521

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23RD. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TIMOTHY MARK PUGH**

Age **33** Birthplace **MD.**  
 (State)

Groom's Residence **2915 EASTERN AVE.**

Marital Status **DIVORCED**

Bride's Name **CAROLYN SUE RAMEY**

Age **24** Birthplace **OHIO**  
 (State)

Bride's Residence **2915 EASTERN AVE.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 23, 86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 23 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38674

State of Maryland

LICENSE NO.  
137456

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23RD day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                                            |                |               |            |                       |
|-------------------|--------------------------------------------|----------------|---------------|------------|-----------------------|
| Groom's Name      | <b>GREGORY ANTHONY LLOYD</b>               | Age            | <b>31</b>     | Birthplace | <b>MD.</b><br>(State) |
| Groom's Residence | <b>2608 CAMBERWELL COURT. BALTO.CO.,MD</b> | Marital Status | <b>SINGLE</b> |            |                       |
| Bride's Name      | <b>LINDA DENISE CAREY</b>                  | Age            | <b>29</b>     | Birthplace | <b>MD.</b><br>(State) |
| Bride's Residence | <b>2608 CAMBERWELL COURT. BALTO.CO.,MD</b> | Marital Status | <b>SINGLE</b> |            |                       |

Relationship to groom if any **NONE****BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 23 86****DEP.CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 23 1986****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 55.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

86-38675

LICENSE NO.

51794

Copy for State Department of Health and Mental Hygiene  
BALTIMORE CITY (30)

I Hereby Certify that on the 23RD day of OCTOBER 19 86

BALTIMORE CITY

the following persons were by me united in marriage at

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD VANLANDINGHAM**  
Groom's Residence **1002 E. PRATT STREET**  
Bride's Name **SHIRLYNN CARTER**  
Bride's Residence **1002 E. PRATT STREET**

Age **28** Birthplace **MD.**  
(State)

Marital Status **SINGLE**

Age **28** Birthplace **MD.**  
(State)

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergyman or Authorized Officer

License Date **SEPT. 19**

**86 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

FOR LOC. #136734

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 23 1986**

License Fee - Resident \$  
Non-Resident \$

*Paul T. Chester*  
Signature-Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38376

LICENSE NO.  
 137149

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23RD day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                              |                |               |            |            |
|------------------------------|------------------------------|----------------|---------------|------------|------------|
| Groom's Name                 | <b>DERRICK R. KESS</b>       | Age            | <b>22</b>     | Birthplace | <b>MD.</b> |
| Groom's Residence            | <b>3310 ST. AMBROSE AVE.</b> | Marital Status | <b>SINGLE</b> |            |            |
| Bride's Name                 | <b>ANNA M. HAIRSTON</b>      | Age            | <b>21</b>     | Birthplace | <b>VA.</b> |
| Bride's Residence            | <b>3310 ST. AMBROSE AVE.</b> | Marital Status | <b>SINGLE</b> |            |            |
| Relationship to groom if any | <b>NONE</b>                  |                |               |            |            |

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 3RD 86** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **OCT 23 1986**

License Fee \$ 35<sup>00</sup>

**SAUNDRA E. BANKS CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

DEP. CLK.-CIRCULAR COUNT OF B.F.T.O.



2

*Certificate of Marriage*  
*State of Maryland*

86-38677

LICENSE NO.  
 136807

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 1ST. day of OCTOBER 7 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TUNDE RASAK BAWA** Age **25** Birthplace **NIGERIA**  
(State)  
 Groom's Residence **7-A VALLEY ARBOR CT. BALTO.CO.,MD** Marital Status **SINGLE**  
 Bride's Name **CATHY ELAINA JONES** Age **20** Birthplace **MD.**  
(State)  
 Bride's Residence **7-A VALLEY ARBOR CT. BALTO.CO.,MD** Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 19**

**86 DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 1 1986**  
**SAUNDRA E. BARKS, CLERK**

License Fee \$ 35<sup>00</sup>

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38678

LICENSE NO.  
137508

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Oct 1986

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

VINCENT STEWART

Age 18

Birthplace

N.Y.  
(State)

Groom's

Residence

5317 BOSWORTH AV. BALTO.CO.,MD

Marital Status

SINGLE

Bride's

Name

BRIGETT TRACIE KELLY

Age 22

Birthplace

MD.  
(State)

Bride's

Residence

4401 PENHURST AVE.

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT 22

John F. Wankamell  
Name of Officiating Clergy or Authorized Officer

86

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-24-86

License Fee \$

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-30679

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137402

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE., MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD P MUSTIN**  
Groom's Residence **1605 MARSHALL ST**

Age **20** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**

Bride's Name **SHARON M SHORT**  
Bride's Residence **438 N LUZERNE AVE**

Age **16** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**

Relationship to groom if any

**NONE**

*[Signature]*

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 24TH 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 24 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 30

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

06-28680

State of Maryland

LICENSE NO.

137504

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24TH. day of OCTOBER 9 1986**BALTIMORE, MD.**

the following persons were by me united in marriage at

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**JAMES J MILLER**Age **24**

Birthplace

**MD.**

(State)

Groom's  
Residence**441 BIGLEY RD BALTO CO MD**

Marital Status

**SINGLE**

Bride's

Name

**ANNA M TOSKES**Age **23**

Birthplace

**ARIZ**

(State)

Bride's

Residence

**3612 ANNAPOLIS RD BALTO CO MD**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****BARBARA J.****PITT**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

License Date

**OCT 22****86**

jw

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 24 1986****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$

**35<sup>00</sup>**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38681

State of Maryland

LICENSE NO.

137285

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24TH. day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOHNNIE GILLIAM

Age

54

Birthplace

S.C.

(State)

Groom's  
Residence

630 PITCHER STREET

Marital Status

SINGLE

Bride's  
Name

ARLEEN BROOKS

Age

30

Birthplace

MD.

(State)

Bride's

Residence

1137 N. CAREY STREET

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 16 86DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 24 1986

License Fee \$

35.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38682

LICENSE NO.  
 137341

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of OCT 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HERBERT TAFF VEREEN**

Age **43** Birthplace **S.C.**  
 (State)

Groom's Residence **7 S. CAREY STREET.**

Marital Status **SINGLE**

Bride's Name **MARY ELIZABETH LEWIS**

Age **45** Birthplace **N.C.**  
 (State)

Bride's Residence **318 S. VINCENT STREET.**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**JOAN ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 24 86**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 24 1986**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38683

LICENSE NO.  
137495

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS W. MC GINN, JR.** Age **43** Birthplace **MD.**  
(State)  
Groom's Residence **801 STRATHEON WAY, BALTO.CO., MD.** Marital Status **DIVORCED**  
Bride's Name **MARY C. KELLY** Age **52** Birthplace **MD.**  
(State)  
Bride's Residence **5426 BELAIR RD.** Marital Status **DIVORCED**  
Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 23RD 86** **DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 24 1986

License Fee \$ 50

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-33684

LICENSE NO.  
137447

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of OCTOBER 7 19 86

BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name CHRIS ALAN SCITTI Age 31 Birthplace PA.  
(State)

Groom's Residence 508 DUNKIRK RD. BALTO. CO., MD. Marital Status SINGLE

Bride's Name SANDRA LYNN EBBERT Age 25 Birthplace MD.  
(State)

Bride's Residence 3 HAMPTON RD. A.A.CO., MD. Marital Status DIVORCED

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 20 86 DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 24 1986

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38685

LICENSE NO.  
137529

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                        |                |        |            |                |
|------------------------------|------------------------|----------------|--------|------------|----------------|
| Groom's Name                 | STERLING ANTHONY SMITH | Age            | 29     | Birthplace | MD.<br>(State) |
| Groom's Residence            | 208 STRICKER STREET.   | Marital Status | SINGLE |            |                |
| Bride's Name                 | RENEE MICHELE CROSBY   | Age            | 22     | Birthplace | MD.<br>(State) |
| Bride's Residence            | 2601 OAKLEY AVE.       | Marital Status | SINGLE |            |                |
| Relationship to groom if any | NONE                   |                |        |            |                |

BARBARA J. PITT

Name of Officiating Clergy or Authorized Officer

License Date OCT. 24TH 86

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy as recorded in this  
office on OCT 24 1986  
SAUNDRA E. BANKS, CLERK

License Fee \$ 55

Signature — Clerk of the Court



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38686

LICENSE NO.  
137459

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Oct 1986

the following persons were by me united in marriage at

Baltimore Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID KENSLEY FEARS**

Age **38** Birthplace **MD.**  
(State)

Groom's Residence **3909 DORCHESTER ROAD**

Marital Status **DIVORCED**

Bride's Name **DIANE JUNIOR**

Age **32** Birthplace **MD.**  
(State)

Bride's Residence **3909 DORCHESTER ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT 24 86**

**JW**

Joan Anderson  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-24-86

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK  
Signature of Clerk of the Court



2

## Certificate of Marriage

86-38687

State of Maryland

LICENSE NO.

137486

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24 day of Oct 1986

the following persons were by me united in marriage at

Baltimore, Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

PHILIP E. HARRELL

Age **41**

Birthplace

MD.  
(State)

Groom's

Residence

1619 MARSHALL STREET.

Marital Status

DIVORCED

Bride's

Name

PATRICIA A. SHACKA

Age **45**

Birthplace

W. VA.  
(State)

Bride's

Residence

1619 MARSHALL STREET.

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date OCT. 23rd

86

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-24-86

License Fee \$

35.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38688

LICENSE NO.  
137454

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Oct 1986

the following persons were by me united in marriage at

Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                     |                |          |            |     |
|------------------------------|---------------------|----------------|----------|------------|-----|
| Groom's Name                 | JESSE L. BYRD, 3RD. | Age            | 33       | Birthplace | MD. |
| Groom's Residence            | 1100 ELBANK AVE.    | Marital Status | DIVORCED |            |     |
| Bride's Name                 | CHARRONE T. DAVIS   | Age            | 23       | Birthplace | MD. |
| Bride's Residence            | 1100 ELBANK AVE.    | Marital Status | SINGLE   |            |     |
| Relationship to groom if any |                     | NONE           |          |            |     |

License Date OCT. 21 86

Joan Anderson  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on OCT 24 1986

License Fee \$ 3.50

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.





2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38689

LICENSE NO.  
135295

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Oct 1986

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **NATHANIEL MCKENZIE**

Age **47** Birthplace **S.C.**  
(State)

Groom's Residence **2111 CRIMEA ROAD.**

Marital Status **DIVORCED**

Bride's Name **MICHELLE A. SANDS**

Age **30** Birthplace **MD.**  
(State)

Bride's Residence **2111 CRIMEA ROAD.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **JULY 16, 86**

Joan Anderson  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-24-86  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 5.00



2

*Certificate of Marriage*  
*State of Maryland*

86-38690

LICENSE NO.  
137052

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24 day of Oct 19 86

the following persons were by me united in marriage at Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                   |                |        |            |                   |
|-------------------|-------------------|----------------|--------|------------|-------------------|
| Groom's Name      | MARINOS P. BARIS  | Age            | 21     | Birthplace | GREECE<br>(State) |
| Groom's Residence | 638 S. OLDHAM ST. | Marital Status | SINGLE |            |                   |
| Bride's Name      | DESPINA K. KELIS  | Age            | 23     | Birthplace | GREECE<br>(State) |
| Bride's Residence | 635 SAVAGE ST.    | Marital Status | SINGLE |            |                   |

Relationship to groom if any NONE

License Date SEPT. 30 86

John F. Wankmel  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-24-86

License Fee \$ 35

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38691

LICENSE NO.  
137472

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22ND. day of OCTOBER 1986

**BALTIMORE, MD.**

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD E. SEARS**

Age **22** Birthplace **MD.**  
(State)

Groom's Residence **538 E. CLEMENT ST.**

Marital Status **SINGLE**

Bride's Name **PATRICIA A. DAVIS**

Age **25** Birthplace **MD.**  
(State)

Bride's Residence **625 E. CLEMENT ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 20 86** **DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 22 1986**

License Fee \$ 75

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38692

LICENSE NO.  
137534

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANDREW WESLEY KNOX**  
Groom's Residence **4414 LA PLATA AVENUE**  
Bride's Name **CECELIA MC FADDEN**  
Bride's Residence **2506 MC HENRY STREET**

Age **45** Birthplace **S.C.**  
(State)  
Marital Status **DIVORCED**  
Age **35** Birthplace **MD.**  
(State)  
Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 24,**

**86** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 28 1986**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 3.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38693

LICENSE NO.  
137554

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PAUL VERNON ALISEA, JR**

Age **43** Birthplace **MD.**  
(State)

Groom's Residence **1329 WELDON AVE.**

Marital Status **DIVORCED**

Bride's Name **CAROL V. MULLIGAN**

Age **33** Birthplace **MD.**  
(State)

Bride's Residence **1312 WELDON AVE.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 27,**

**86 DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38694

LICENSE NO.  
 137561

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                          |                |        |            |             |
|------------------------------|--------------------------|----------------|--------|------------|-------------|
| Groom's Name                 | ARMANDO S ACAB           | Age            | 26     | Birthplace | PHILIPPINES |
|                              |                          |                |        | (State)    |             |
| Groom's Residence            | 944 1ST STREET A.A.CO.MD | Marital Status | SINGLE |            |             |
| Bride's Name                 | DAWN M JENKINS           | Age            | 23     | Birthplace | MD.         |
|                              |                          |                |        | (State)    |             |
| Bride's Residence            | 944 1ST STREET A.A.CO.MD | Marital Status | SINGLE |            |             |
| Relationship to groom if any | NONE                     |                |        |            |             |
|                              | BARBARA J. PITT          |                |        |            |             |

License Date OCT 27 86

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 27 1986**

License Fee \$

35.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38695

State of Maryland

LICENSE NO.  
135042

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 3<sup>rd</sup> day of Oct 9 1986

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **ERNEST C. GREEN, Jr.**

Age

**25**

Birthplace

**MD.**  
(State)

Groom's

Residence **2428 BIDDLE STREET**

Marital Status

**SINGLE**

Bride's

Name **MICHELLE D. JONES**

Age

**22**

Birthplace

**N.Y.**  
(State)

Bride's

Residence **1224 APPLELEAF COURT**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**License Date **JULY 7**

86

John F. Wallick

Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

10-30-86**SAUNDRA E. BANKS, CLERK**

License Fee \$

25<sup>00</sup>

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38696

State of Maryland

LICENSE NO.  
136662

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of OCTOBER / 19 86the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name JOSEPH W. RHYANESAge 32 Birthplace MD.  
(State)

Groom's

Residence 712 N. MARTIN LUTHER KING BLVD. Marital Status DIVORCED

Bride's

Name PATSY HAMPTON WOMACKAge 40 Birthplace MD.  
(State)

Bride's

Residence 712 N. MARTIN LUTHER KING BLVD. Marital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 30 86DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 30 1986License Fee \$ 55SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38697

LICENSE NO.  
 137603

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                   |            |                   |                |           |                 |                |
|-------------------|-------------------|------------|-------------------|----------------|-----------|-----------------|----------------|
| Groom's Name      | <b>TALMADGE</b>   | <b>F.</b>  | <b>SMITH, SR.</b> | Age            | <b>45</b> | Birthplace      | <b>S. CAR.</b> |
|                   |                   |            |                   |                |           | (State)         |                |
| Groom's Residence | <b>1907 BRUNT</b> | <b>ST.</b> |                   | Marital Status |           | <b>DIVORCED</b> |                |
| Bride's Name      | <b>MARGARET</b>   |            | <b>CHATMAN</b>    | Age            | <b>29</b> | Birthplace      | <b>GA.</b>     |
|                   |                   |            |                   |                |           | (State)         |                |
| Bride's Residence | <b>1907 BRUNT</b> | <b>ST.</b> |                   | Marital Status |           | <b>SINGLE</b>   |                |

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 30TH 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 30 1986**

License Fee \$ 25

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38698

LICENSE NO.  
 137602

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 29TH. day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **KENNETH WAYNE LOCUS**

Age **20** Birthplace **MD.**  
 (State)

Groom's  
 Residence **2861 EDGECOMB CIRCLE**

Marital Status **SINGLE**

Bride's  
 Name **MICHELLE DELORES HECTOR**

Age **18** Birthplace **MD.**  
 (State)

Bride's  
 Residence **2861 EDGECOMB CIRCLE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 29 1986**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **OCT. 29,**

**86**

License Fee \$ 3.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-30699

LICENSE NO.  
 137515

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23 day of OCT 7 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                                       |                |                 |            |                       |
|-------------------|---------------------------------------|----------------|-----------------|------------|-----------------------|
| Groom's Name      | <b>FRANK GORDON HARPER</b>            | Age            | <b>30</b>       | Birthplace | <b>MD.</b><br>(State) |
| Groom's Residence | <b>2738 VIRGINIA AV. BALTO.CO.,MD</b> | Marital Status | <b>SINGLE</b>   |            |                       |
| Bride's Name      | <b>THERESA JO BROWN</b>               | Age            | <b>24</b>       | Birthplace | <b>MD.</b><br>(State) |
| Bride's Residence | <b>2738 VIRGINIA AV. BALTO.CO.,MD</b> | Marital Status | <b>DIVORCED</b> |            |                       |

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 23 1986**

**JW**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 23 1986**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 5.50

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38700

LICENSE NO.  
 137505

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22 day of OCT 19 86

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                             |                |               |                        |            |
|------------------------------|---------------------------------------------|----------------|---------------|------------------------|------------|
| Groom's Name                 | <b>OCCEY O. HARRIS</b>                      | Age            | <b>25</b>     | Birthplace             | <b>MD.</b> |
|                              |                                             |                |               | <small>(State)</small> |            |
| Groom's Residence            | <b>1314 SANDY STONE WAY, BALTO.CO., MD.</b> |                |               |                        |            |
| Bride's Name                 | <b>SHEILA A. OVERBEY</b>                    | Age            | <b>25</b>     | Birthplace             | <b>MD.</b> |
|                              |                                             |                |               | <small>(State)</small> |            |
| Bride's Residence            | <b>1701 WINDEMERE AVE.</b>                  |                |               |                        |            |
|                              |                                             | Marital Status | <b>SINGLE</b> |                        |            |
|                              |                                             | Marital Status | <b>SINGLE</b> |                        |            |
| Relationship to groom if any | <b>NONE</b>                                 |                |               |                        |            |

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 22 86**

**100 N. CALVERT ST, 21202**

Title and Religious Denomination or Office

**JW**

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 3.00

**OCT 22 1986**  
**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38701

LICENSE NO.  
 137548

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT OSBORNE** Age **35** Birthplace **GA.**  
(State)

Groom's Residence **1715 DEARWOOD CT. HARFORD CO., MD.** Marital Status **DIVORCED**

Bride's Name **DONNA SHILANE OUTLAW** Age **24** Birthplace **PA.**  
(State)

Bride's Residence **1715 DEARWOOD CT. HARFORD CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 24TH 86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 31 1986**

License Fee \$ 5.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38702

LICENSE NO.  
 137518

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **JOSEPH MORRIS ZAHL**  
 Groom's  
 Residence **4721 WILLISTON STREET**  
 Bride's  
 Name **THERESA MARIE GAHAN**  
 Bride's  
 Residence **4721 WILLISTON STREET**

Age **29** Birthplace **MD.**  
(State)  
 Marital Status **DIVORCED**  
 Age **23** Birthplace **MD.**  
(State)  
 Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 31 86** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**  
Title and Religious Denomination or Office

**TT**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 31 1986**

License Fee \$ 5.50

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38703

LICENSE NO.  
 137575

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                      |                |          |            |     |
|------------------------------|----------------------|----------------|----------|------------|-----|
| Groom's Name                 | ALEXANDER S. CAPERNA | Age            | 70       | Birthplace | MD. |
| Groom's Residence            | 2842 PELHAM AVE.     | Marital Status | DIVORCED |            |     |
| Bride's Name                 | NEENA M. BISIN       | Age            | 18       | Birthplace | MD. |
| Bride's Residence            | 2842 PELHAM AVE.     | Marital Status | SINGLE   |            |     |
| Relationship to groom if any | NONE                 |                |          |            |     |

License Date OCT. 27 86

JW

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on 10-27-86

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38704

State of Maryland

LICENSE NO.

133525

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31ST day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MACK HAM

Age 50

Birthplace

S CAR

(State)

Groom's

734 GRANTLEY ST

Residence

Marital Status

SINGLE

Bride's

Name

BARBARA J PARTLOW

Age 34

Birthplace

MD.

(State)

Bride's

Residence

770 W SARATOGA ST

Marital Status

SINGLE

Relationship to groom if any

NONE

BABBARA J. PITT

Name of Officiating Clergy or Authorized Officer

License Date MAY 7 86

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1986

License Fee \$

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38705

LICENSE NO.  
137632

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **GEORGE LAWRENCE TYLER**

Age **28** Birthplace **MD.**  
(State)

Groom's  
Residence **605 N. HIGHLAND AVENUE**

Marital Status **SINGLE**

Bride's  
Name **ALICIA ANN FITZGERALD**

Age **18** Birthplace **MD.**  
(State)

Bride's  
Residence **605 N. HIGHLAND AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 31ST 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true and correct copy of a record filed in this

office on **OCT 31 1986**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 55

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38706

LICENSE NO.  
137649

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST. day of OCTOBER 9<sup>19</sup> 86

BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                 |                |               |            |                 |
|------------------------------|---------------------------------|----------------|---------------|------------|-----------------|
| Groom's Name                 | <b>HARVEY H. RUBIN</b>          | Age            | <b>27</b>     | Birthplace | <b>MD.</b>      |
|                              |                                 |                |               | (State)    |                 |
| Groom's Residence            | <b>1901 N. FOREST PARK AVE.</b> | Marital Status | <b>SINGLE</b> |            |                 |
| Bride's Name                 | <b>SITA GOPAUL</b>              | Age            | <b>28</b>     | Birthplace | <b>TRINIDAD</b> |
|                              |                                 |                |               | (State)    |                 |
| Bride's Residence            | <b>1901 N. FOREST PARK AVE.</b> | Marital Status | <b>SINGLE</b> |            |                 |
| Relationship to groom if any | <b>NONE</b>                     |                |               |            |                 |

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 31,**

**86**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 31 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 30.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38707

## State of Maryland

LICENSE NO.

137430

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 31 day of Oct 9 1986

the following persons were by me united in marriage at

Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |          |            |      |
|------------------------------|-------------------------------------|----------------|----------|------------|------|
| Groom's Name                 | ANTHONY YOKA                        | Age            | 45       | Birthplace | FLA. |
| Groom's Residence            | 1746 DEERWOOD CT., HARFORD CO., MD. | Marital Status | SINGLE   |            |      |
| Bride's Name                 | CATHERINE J. HAMILTON               | Age            | 43       | Birthplace | MD.  |
| Bride's Residence            | 1746 DEERWOOD CT., HARFORD CO., MD. | Marital Status | DIVORCED |            |      |
| Relationship to groom if any | NONE                                |                |          |            |      |

License Date OCT 21 86

jw

John F. Wankam  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 10-31-86

SAUNDRA E. BARRS, CLERK

Signature - Clerk of the Court

License Fee \$ 55

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38708

LICENSE NO.  
137583

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                |                |               |            |             |
|------------------------------|--------------------------------|----------------|---------------|------------|-------------|
| Groom's Name                 | <b>WILLIAM RUSSELL MC NAIR</b> | Age            | <b>27</b>     | Birthplace | <b>ALA.</b> |
|                              |                                |                |               | (State)    |             |
| Groom's Residence            | <b>1424 RIVERSIDE AV.</b>      | Marital Status | <b>SINGLE</b> |            |             |
| Bride's Name                 | <b>CINDY ANN REICHART</b>      | Age            | <b>30</b>     | Birthplace | <b>PA.</b>  |
|                              |                                |                |               | (State)    |             |
| Bride's Residence            | <b>1424 RIVERSIDE AV.</b>      | Marital Status | <b>SINGLE</b> |            |             |
| Relationship to groom if any | <b>NONE</b>                    |                |               |            |             |

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 31ST 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**OCT 31 1986**  
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 35

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court





2

*Certificate of Marriage*  
*State of Maryland*

86-38709

LICENSE NO.  
 137653

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                   |                |        |                        |     |
|------------------------------|-------------------|----------------|--------|------------------------|-----|
| Groom's Name                 | KENNETH L. SMITH  | Age            | 26     | Birthplace             | VA. |
|                              |                   |                |        | <small>(State)</small> |     |
| Groom's Residence            | 722 RICHWOOD AVE. | Marital Status | SINGLE |                        |     |
| Bride's Name                 | ROBIN S. MILLS    | Age            | 26     | Birthplace             | MD. |
|                              |                   |                |        | <small>(State)</small> |     |
| Bride's Residence            | 1408 WINSTON AVE. | Marital Status | SINGLE |                        |     |
| Relationship to groom if any | NONE              |                |        |                        |     |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 31 86

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1986  
 SAUNDRA E. BANKS, CLERK

License Fee \$ 35.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38710

LICENSE NO.  
 137646

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31<sup>ST</sup> day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)  
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **WILLIE GARY CARTER**

Age **31** Birthplace **MD.**  
(State)

Groom's  
 Residence **1223 ARGYLE AVE.**

Marital Status **DIVORCED**

Bride's  
 Name **ALETHA MCCOY**

Age **31** Birthplace **MD.**  
(State)

Bride's  
 Residence **1223 ARGYLE AVE.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 31 86**

**DEPUTY CLERK-CIRCUIT COURT BALTO. CTY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 31 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 2.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38711

LICENSE NO.  
137630

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST. day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GEOFFREY RANDAL TAYLOR Age 34 Birthplace N.C.  
(State)

Groom's Residence 3612 COURTHOUSE DR. HOWARD CO., MD. Marital Status DIVORCED

Bride's Name VICKI LYNN WHITE Age 34 Birthplace MD.  
(State)

Bride's Residence 4702 DUNKIRK AVENUE Marital Status DIVORCED

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on OCT 31 1986

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38712

LICENSE NO.  
 137635

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WALTER RUSSELL COLLINS, JR. Age 39 Birthplace MD.  
 (State)  
 Groom's Residence 16 A WESTWAY SOUTH BALTO.CO.,MD. Marital Status DIVORCED  
 Bride's Name JUDY L. HOMMERBOCKER Age 26 Birthplace MD.  
 (State)  
 Bride's Residence 16 A WESTWAY SOUTH BALTO.CO.,MD. Marital Status SINGLE  
 Relationship to groom if any NONE

John T. Wankemill  
 Name of Officiating Clergy or Authorized Officer

License Date OCT 31 86

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 31 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 5.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

92



This copy to be filed by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38713

LICENSE NO.  
137463

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28TH. day of OCTOBER 9 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICKY P. HAMILTON**

Age **27** Birthplace **MD.**  
(State)

Groom's Residence **914 SHUTER ST.**

Marital Status **SINGLE**

Bride's Name **SHARON D. ELDRIDGE**

Age **24** Birthplace **MD.**  
(State)

Bride's Residence **914 SHUTER ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **OCT 28 1986**

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

License Fee \$ 32.00





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38714

LICENSE NO.  
137595

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **DANIEL ROOSEVELT MORGAN**  
Groom's  
Residence **2606 N. HILTON STREET.**

Age **47** Birthplace **MD.**  
(State)

Marital Status **DIVORCED**

Bride's  
Name **SANDRA ELAINE GETTIS**  
Bride's  
Residence **2607 N. HILTON STREET.**

Age **34** Birthplace **MD.**  
(State)

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCTOBER 27 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this  
office on **OCT 27 1986**

License Fee \$ 5.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court



2

## Certificate of Marriage

86-38715

State of Maryland

LICENSE NO.  
137536

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH day of OCTOBER 7 19 86the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **NIKOLAOS GIDAKOS**Age **24** Birthplace **GREECE**  
(State)

Groom's

Residence **535 S. WICKHAM ROAD**Marital Status **SINGLE**

Bride's

Name **NADINE JONES**Age **23** Birthplace **MARYLAND**  
(State)

Bride's

Residence **NADINE CHESTER ST.**Marital Status **DIVORCED**Relationship to groom if any **NONE****BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 27TH 86****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination of Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 3.00**OCT 27 1986**  
**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38716

LICENSE NO.  
 137559

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 29TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**BEHMI GERCEKER**

69

Age **35** Birthplace **TURKEY**  
(State)

Groom's

Residence **MANHATTEN., NEW YORK**

Marital Status **SINGLE**

Bride's

Name **BARBARA M. THOMPSON**

Age **30** Birthplace **WASH. D.C.**  
(State)

Bride's

Residence **1618 LANCASTER STREET.**

25

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 29**

86

**DEPUTY CLERK- CIRCUIT COURT BALTO. CTY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 29 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38717

LICENSE NO.  
137571

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28 day of OCT 9 19 86

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                   |                               |    |                |    |            |                  |
|-------------------|-------------------------------|----|----------------|----|------------|------------------|
| Groom's Name      | MARK EDWARD CONROY            | 66 | Age            | 19 | Birthplace | MASS.<br>(State) |
| Groom's Residence | LINCOLN, NEW HAMPSHIRE        |    | Marital Status |    | SINGLE     |                  |
| Bride's Name      | MAUREEN ANNE GUINESSEY        | 25 | Age            | 25 | Birthplace | MD.<br>(State)   |
| Bride's Residence | 1208 WINNER ROAD A.A.CO., MD. |    | Marital Status |    | SINGLE     |                  |

Relationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEP. CLK.- CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 28 1986  
SAUNDRA E. BARKS, CLERK

Signature - Clerk of the Court

License Fee \$ 35

JW



2

## Certificate of Marriage

86-38718

State of Maryland

LICENSE NO.

137552

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH day of OCTOBER 1986the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

TONY D GARDNER

51

Age 28 Birthplace MICH  
(State)Groom's  
Residence

DETROIT MICH

Marital Status DIVORCEDBride's  
Name

DANIELA CERVELLINI

75

Age 29 Birthplace ITALY  
(State)Bride's  
Residence

PHILA PA

Marital Status SINGLE  
NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 27,

86

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 27 1986SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the CourtLicense Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38719

State of Maryland

LICENSE NO.  
137502

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31ST. day of OCTOBER 19 9 86the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name OLABISI KED OYINLOYEAge 47 Birthplace NIGERIA  
(State)Groom's  
Residence WASHINGTON, D. C.Marital Status SINGLEBride's  
Name JOYCE MINORAge 25 Birthplace MARYLAND  
(State)Bride's  
Residence 2414 SEABURY ROADMarital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 22,

86

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 31 1986License Fee \$ 35.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38720

LICENSE NO.  
 137540

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWIN VAZQUEZ**

Age **28** Birthplace **PUERTO RICO**  
(State)

Groom's Residence **551 WICKHAM RD**

Marital Status **SINGLE**

Bride's Name **IVONNE LACERDA**

Age **24** Birthplace **BRAZIL**  
(State)

Bride's Residence **WASHINGTON DC**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 30 1986**

License Fee \$ 55

**SAUNDRA E. BANKS CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

1707

1707

1707

1707

1707



2

*Certificate of Marriage*  
*State of Maryland*

86-38721

LICENSE NO.  
137507

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22ND day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID MARIN**

Age 21 Birthplace **NEW YORK**  
(State)

Groom's Residence **MANHATTEN, NEW YORK**

Marital Status **SINGLE**

Bride's Name **TESSY GUZMAN**

Age 17 Birthplace **PERU**  
(State)

Bride's Residence **MANHATTEN, NEW YORK**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

*Risa A. Humphreys*  
Name of Officiating Clergy or Authorized Officer

License Date **OCT. 22**

**86 DEPUTY CLERK - CIRCUIT COURT BALTO. CTY**  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 22 1986**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 50

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38722

LICENSE NO.  
137491

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21ST day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT LEE STEPHENS, JR**

Age **26** Birthplace **N.C.**  
(State)

Groom's Residence **SEAVIEW., VIRGINIA**

Marital Status **SINGLE**

Bride's Name **MARY ELIZABETH YOUNG**

Age **29** Birthplace **VA.**  
(State)

Bride's Residence **1608 EARECKSON PLACE.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**BARBARA N. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 22ND 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 22 1986**

License Fee \$ 2.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38723

LICENSE NO.  
137532

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of OCTOBER 9 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LEONARD E GUESS JR**

Age **32** Birthplace **PA**  
(State)

Groom's Residence **PHILA PA**

Marital Status **DIVORCED**

Bride's Name **KIM M MC DUFFIE**

Age **26** Birthplace **PA.**  
(State)

Bride's Residence **PHILA PA**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 24,**

**86 DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 5.50

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



75

OCT 24 1986



2

*Certificate of Marriage*  
*State of Maryland*

86-38724

LICENSE NO.  
137498

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22ND day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                |                |               |            |             |
|------------------------------|--------------------------------|----------------|---------------|------------|-------------|
| Groom's Name                 | <b>TYRONE A. DOWDY, SR.</b>    | Age            | <b>24</b>     | Birthplace | <b>GA.</b>  |
|                              |                                |                |               | (State)    |             |
| Groom's Residence            | <b>MOUNT HOLLY, NEW JERSEY</b> | Marital Status | <b>SINGLE</b> |            |             |
| Bride's Name                 | <b>NANCY E. WILSON</b>         | Age            | <b>19</b>     | Birthplace | <b>N.J.</b> |
|                              |                                |                |               | (State)    |             |
| Bride's Residence            | <b>MOUNT HOLLY, NEW JERSEY</b> | Marital Status | <b>SINGLE</b> |            |             |
| Relationship to groom if any | <b>NONE</b>                    |                |               |            |             |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 22 86**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 22 1986**

License Fee \$ 50

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38725

LICENSE NO.  
 137220

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21ST day of OCTOBER 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT CARL BERTOLATUS**

Age **33** Birthplace **NEW JERSEY**  
(State)

Groom's Residence **NEW BRUNSWICK, NEW JERSEY**

Marital Status **SINGLE**

Bride's Name **LESLIE ANN BROOKES**

Age **37** Birthplace **NEW JERSEY**  
(State)

Bride's Residence **NEW BRUNSWICK, NEW JERSEY**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 21ST 86**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

**OCT 21 1986**

License Fee \$ 35.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38726

LICENSE NO.  
137396

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 16TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                              |    |                |        |                        |      |
|------------------------------|------------------------------|----|----------------|--------|------------------------|------|
| Groom's Name                 | DARREN D SPENCER             | 85 | Age            | 22     | Birthplace             | W VA |
|                              |                              |    |                |        | <small>(State)</small> |      |
| Groom's Residence            | RALEIGH W VA                 |    | Marital Status | SINGLE |                        |      |
| Bride's Name                 | BETH M COUSINS               | 25 | Age            | 18     | Birthplace             | W VA |
|                              |                              |    |                |        | <small>(State)</small> |      |
| Bride's Residence            | 321 LOD BYRON LA BALTO CO MD |    | Marital Status | SINGLE |                        |      |
| Relationship to groom if any | NONE                         |    |                |        |                        |      |

BARBARA J. PITT  
Name of Officiating Clergy or Authorized Officer

License Date **OCT. 16TH 86** **DEPUTY CLERK-CIRCUIT COURT**  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer  
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 16 1986  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 5.00

Signature - Clerk of the Court

1. 1. 1.

2. 2. 2.

3. 3. 3.

4. 4. 4.

5. 5. 5.

2

## Certificate of Marriage

86-38727

State of Maryland

LICENSE NO.

137371

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16 day of OCT 9 19 86the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WYLIE GILES** Age **57** Birthplace **N. CAROLINA**  
(State)

Groom's Residence **5630 MITCHELL RD. LEVITTOWN, PA.** Marital Status **WIDOWER**

Bride's Name **BEATRICE CRAVER** Age **57** Birthplace **S. CAROLINA**  
(State)

Bride's Residence **1400 E. MADISON STREET** Marital Status **WIDOW**

Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 16 86**

Title and Religious Denomination or Office

**JW****DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 16 1986**License Fee \$ 30**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38728

LICENSE NO.  
 137049

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH day of OCTOBER 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                        |                |          |                        |        |
|------------------------------|------------------------|----------------|----------|------------------------|--------|
| Groom's Name                 | STEVEN K. EDDY         | Age            | 22       | Birthplace             | OHIO   |
|                              |                        |                |          | <small>(State)</small> |        |
| Groom's Residence            | MAYFIELD HEIGHTS, OHIO | Marital Status | DIVORCED |                        |        |
| Bride's Name                 | ELAINE M. LEAVITT      | Age            | 22       | Birthplace             | CALIF. |
|                              |                        |                |          | <small>(State)</small> |        |
| Bride's Residence            | SAN JOSE, CALIFORNIA   | Marital Status | DIVORCED |                        |        |
| Relationship to groom if any | NONE                   |                |          |                        |        |

BARBARA J. PITT

Name of Officiating Clergy or Authorized Officer

License Date OCT. 17TH 86

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on OCT 17 1986

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38729

LICENSE NO.  
 137419

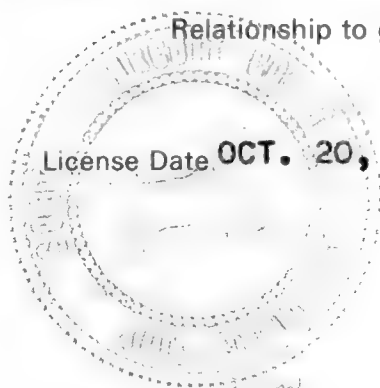
Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH. day of OCTOBER 9 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RICHARD JAMES DODOO 25 Age 41 Birthplace GHANA  
 (State)  
 Groom's Residence 1421 DARIUS CT. BALTO. CO., MD. Marital Status DIVORCED  
 Bride's Name NANA GRAVES Age 38 Birthplace GHANA  
 (State)  
 Bride's Residence MONTREAL, CANADA 90 Marital Status SINGLE  
 Relationship to groom if any NONE



License Date OCT. 20,

86 JOHN WANKMILLER  
 Name of Officiating Clergy or Authorized Officer  
DEPUTY CLERK- CIRCUIT COURT  
 Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on OCT 20 1986  
SACRINA E. BANKS, CLERK

License Fee \$ 35

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38730

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
137180

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7TH day of OCTOBER 9 1986  
**BALTIMORE, MD.**

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GLENN MITCHELL JOHNSON**

Age 22 Birthplace **MD**  
(State)

Groom's Residence **2429 MC ELDERRY ST**

Marital Status **SINGLE**

Bride's Name **YVETTE PARKER**

Age 23 Birthplace **N Y**  
(State)

Bride's Residence **QUEENS N Y**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

**100 N. CALVERT ST. 21202**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **OCT 7 1986**

License Fee \$ 30

**SAUNDRA E. BANKS, CLERK**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38731

*Certificate of Marriage**State of Maryland*

LICENSE NO.

137228

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)***I Hereby Certify* that on the 8TH day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**JAMES G SONNIER**Age **24**

Birthplace

**OKLA.**

(State)

Groom's

Residence

**BERKELEY HGTS N J**

Marital Status

**SINGLE**

Bride's

Name

**MARY L ACHEE**Age **23**

Birthplace

**TEXAS**

(State)

Bride's

Residence

**LAFAYETTE LA**

Marital Status

**SINGLE****NONE**

Relationship to groom if any

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 8TH 86****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 8 1986****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

**35.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38732

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137219

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 16TH. day of OCTOBER 9 1986

the following persons were by me united in marriage at BALTIMORE, MD.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN N BATES**

Age **33** Birthplace **PA.**  
 (State)

Groom's Residence **PHILA PA**

Marital Status **SINGLE**

Bride's Name **THERESA FORD**

Age **21** Birthplace **PA.**  
 (State)

Bride's Residence **PHILA PA**

Marital Status **SINGLE**

**NONE**

Relationship to groom if any

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**OCT 16 1986**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 16,**

**86**

License Fee \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.







2

86-38733

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 137283

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 10TH. day of OCTOBER 9 19 86

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |             |         |        |    |                |    |                        |         |
|------------------------------|-------------|---------|--------|----|----------------|----|------------------------|---------|
| Groom's Name                 | ROBERT      | B.      | HARRIS | 25 | Age            | 19 | Birthplace             | MD.     |
|                              |             |         |        |    |                |    | <small>(State)</small> |         |
| Groom's Residence            | 2416        | MAISEL  | CT.    |    | Marital Status |    | SINGLE                 |         |
| Bride's Name                 | PORTIA      | D.      | MOORE  |    | Age            | 21 | Birthplace             | N. CAR. |
|                              |             |         |        |    |                |    | <small>(State)</small> |         |
| Bride's Residence            | JAMESVILLE, | N. CAR. |        | 70 | Marital Status |    | SINGLE                 |         |
| Relationship to groom if any | NONE        |         |        |    |                |    |                        |         |

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 10 1986

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date OCT. 10, 86

License Fee \$

35

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

WAKKANAI  
1917

2

## Certificate of Marriage

86-38734

State of Maryland

LICENSE NO.

137201

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 10TH day of OCTOBER 9 19 86the following persons were by me united in marriage at BALTIMORE, MARYLAND

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIE J. DIXON** Age **25** Birthplace **LA.**  
 Groom's Residence **SHREEVEPORT, LA.** Marital Status **SINGLE**  
 Bride's Name **BEVERLY TAYLOR BRITTON** Age **38** Birthplace **MD.**  
 Bride's Residence **1623 SHADYSIDE RD.** Marital Status **DIVORCED**  
 Relationship to groom if any **NONE**

**RISA A. HUMPHRIES**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 10 86**License Fee \$ **35<sup>n</sup>**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38735

LICENSE NO.

22702

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 31ST day of OCTOBER 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38343

|                              |                                       |                    |                 |                |                      |
|------------------------------|---------------------------------------|--------------------|-----------------|----------------|----------------------|
| Groom's Name                 | <b>Mark Anthony Diehl</b>             | Age                | <b>30</b>       | Birthplace     | <b>Md.</b>           |
| Groom's Residence            | <b>Rt. 3 Box 483<br/>Cumberland</b>   | Allegany           | <b>Maryland</b> | Marital Status | <b>Never married</b> |
| Bride's Name                 | <b>Ronda Marie Palmer</b>             | Age                | <b>25</b>       | Birthplace     | <b>Md.</b>           |
| Bride's Residence            | <b>302 Pulaski St.<br/>Cumberland</b> | Allegany           | <b>Maryland</b> | Marital Status | <b>Divorced</b>      |
| Relationship to groom if any |                                       | <b>Not related</b> |                 |                |                      |

Lee A. McDaniel

Name of Officiating Clergy or Authorized Officer

License Date **October 17** **86** Pastor - **St. John Lutheran Church**  
Title and Religious Denomination or Office

**Rt. 4 Box 71, Cumberland, Maryland**  
Address of Clergy or Authorized Officer

### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **November 11** 1986

License Fee \$ **18.00**

*Gyrene H. Hader*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38736

State of Maryland

LICENSE NO.

22680

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 11th day of October 19 86

the following persons were by me united in marriage at Frostburg, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38329

|                              |                                     |                |               |                   |
|------------------------------|-------------------------------------|----------------|---------------|-------------------|
| Groom's Name                 | Jeffrey Linn Mallow                 | Age 24         | Birthplace    | W. Va.<br>(State) |
| Groom's Residence            | 195 Woods Drive<br>Annapolis AA Md. | Marital Status | Never Married |                   |
| Bride's Name                 | Deborah Denise Peters               | Age 33         | Birthplace    | Texas<br>(State)  |
| Bride's Residence            | 195 Woods Dr.<br>Annapolis AA Md.   | Marital Status | Divorced      |                   |
| Relationship to groom if any |                                     | Not related    |               |                   |

Mr. William E. Price

Name of Officiating Clergy or Authorized Officer

License Date Oct. 10, 86

Pastor - First Congregational Church

Title and Religious Denomination or Office

11812 Crocus Ave., Cumberland, Md.

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

Nov. 16, 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

State of Maryland

86-38737

LICENSE NO.

22760

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 28th day of November 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38401

|                              |                                   |            |           |                |                      |
|------------------------------|-----------------------------------|------------|-----------|----------------|----------------------|
| Groom's Name                 | <b>Terrence Alan Snyder</b>       | Age        | <b>37</b> | Birthplace     | <b>Md.</b>           |
|                              |                                   |            |           | (State)        |                      |
| Groom's Residence            | <b>Rt. 2 Box 454 Williams Rd.</b> |            |           |                |                      |
|                              | <b>Cumberland Allegany</b>        | <b>Md.</b> |           | Marital Status | <b>Divorced</b>      |
| Bride's Name                 | <b>Shirley Ann George</b>         | Age        | <b>34</b> | Birthplace     | <b>Md.</b>           |
|                              |                                   |            |           | (State)        |                      |
| Bride's Residence            | <b>501 Baltimore Ave.</b>         |            |           |                |                      |
|                              | <b>Cumberland Allegany</b>        | <b>Md.</b> |           | Marital Status | <b>Never Married</b> |
| Relationship to groom if any | <b>Not related</b>                |            |           |                |                      |

Rev. Earl E. Mason

Name of Officiating Clergy or Authorized Officer

Pastor of Kingsley United Methodist Church

Title and Religious Denomination or Office

1021 Kent Ave., Cumberland, Md.

Address of Clergy or Authorized Officer

### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on December 1, 1986

License Fee \$ 18.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38738

State of Maryland

LICENSE NO.

22804

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 26th day of November 19 86

the following persons were by me united in marriage at Westernport, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38448

Groom's

Name

David Earl Roach

Age

21

Birthplace

Va.

(State)

Groom's

104 Waverly Street

Residence

Westernport

Allegany

Maryland

Marital Status

Never married

Bride's

Name

Rhonda Jean Wright

Age 26

Birthplace Md.

(State)

Bride's

104 Waverly Street

Residence

Westernport

Allegany

Maryland

Marital Status

Never married

Relationship to groom if any

Not related

John F. Groth

Name of Officiating Clergy or Authorized Officer

License Date Nov. 26 86

Pastor - Westernport Church of the Brethren

Title and Religious Denomination or Office

200 Oak View Drive., Westernport, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on December 1, 1986

License Fee \$ 18.00

Signature - Clerk of the Court



2

# Certificate of Marriage

86-38739

## State of Maryland

LICENSE NO.

22778

Copy for State Department of Health and Mental Hygiene

### ALLEGANY COUNTY (01)

*I Hereby Certify* that on the 16th day of November 1986

the following persons were by me united in marriage at Frostburg, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38417

|                              |                                            |                    |                |                 |                          |
|------------------------------|--------------------------------------------|--------------------|----------------|-----------------|--------------------------|
| Groom's Name                 | <b>William Michael Grab</b>                | Age                | <b>46</b>      | Birthplace      | <b>Pa.</b><br>(State)    |
| Groom's Residence            | <b>32 Beall St.<br/>Frostburg Allegany</b> | Md.                | Marital Status | <b>Widower</b>  |                          |
| Bride's Name                 | <b>Charlotte Ann Snyder</b>                | Age                | <b>50</b>      | Birthplace      | <b>W. Va.</b><br>(State) |
| Bride's Residence            | <b>16 Maple Dr.<br/>Frostburg Allegany</b> | Md.                | Marital Status | <b>Divorced</b> |                          |
| Relationship to groom if any |                                            | <b>Not related</b> |                |                 |                          |

William E. Price

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 14,** **86**

Pastor - First Congragational Church

Title and Religious Denomination or Office

11812 Crocus Ave., Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov. 26, 1986

License Fee \$ \_\_\_\_\_

*Raymond A. Hobbs*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38740

## State of Maryland

LICENSE NO.

22788

Copy for State Department of Health and Mental Hygiene

### ALLEGANY COUNTY (01)

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38435

|                              |                                                    |                    |           |                |                       |
|------------------------------|----------------------------------------------------|--------------------|-----------|----------------|-----------------------|
| Groom's Name                 | <b>Dwayne Eugene Shook</b>                         | Age                | <b>20</b> | Birthplace     | <b>Md.</b><br>(State) |
| Groom's Residence            | <b>9 N. Lee St. Apt. 2<br/>Cumberland Allegnay</b> | Md.                |           | Marital Status | <b>Divorced</b>       |
| Bride's Name                 | <b>Teresa Marie Orndorff</b>                       | Age                | <b>19</b> | Birthplace     | <b>Md.</b><br>(State) |
| Bride's Residence            | <b>9 N. Lee St. Apt. 2<br/>Cumberland Allegany</b> | Md.                |           | Marital Status | <b>Annulment</b>      |
| Relationship to groom if any |                                                    | <b>Not related</b> |           |                |                       |

Rev. Marlin H. Lauver

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 19, 86**

Minister - United Methodist Church

Title and Religious Denomination or Office

12011 Marigold Ave. Sw., Cumberland, Md.

Address of Clergy or Authorized Officer

#### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov. 22, 1986

License Fee \$ **18.00**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38741

LICENSE NO.

22729

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Cresaptown, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38377

|                   |                                                                 |                |                 |            |            |
|-------------------|-----------------------------------------------------------------|----------------|-----------------|------------|------------|
| Groom's Name      | <b>David Leslie Leese</b>                                       | Age            | <b>32</b>       | Birthplace | <b>Md.</b> |
| Groom's Residence | <b>Cecil Ave.<br/>Cresaptown Allegany Md.</b>                   | Marital Status | <b>Divorced</b> |            |            |
| Bride's Name      | <b>Kelly Louise McKenzie</b>                                    | Age            | <b>26</b>       | Birthplace | <b>Md.</b> |
| Bride's Residence | <b>Bloomingfield Mobile Home Park<br/>Rawlings Allegany Md.</b> | Marital Status | <b>Divorced</b> |            |            |

Relationship to groom if any **Not related**

Harold R. McClay, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 28,** **86**United Methodist Clergyman

Title and Religious Denomination or Office

Cresaptown, Md.

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 25, 1986License Fee \$ 18.00
  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38742

LICENSE NO.  
 22784

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38431

Groom's Name **Arthur Eugene Derlan** Age **22** Birthplace **Md.**  
(State)  
 Groom's Residence **304 Virginia Ave. Cumberland Allegany Md.** Marital Status **Never Married**  
 Bride's Name **Susan Elaine LaPorte** Age **21** Birthplace **Md.**  
(State)  
 Bride's Residence **138 Arch St. Cumberland Allegany Md.** Marital Status **Never Married**  
 Relationship to groom if any **Not related**

Dr. John L. Huffaker

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 19, 86**

Minister - Church of the Brethren  
Title and Religious Denomination or Office

1015 Kent Ave., Cumberland, Maryland  
Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 21, 1986

License Fee \$18.00

*[Signature]*

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38743

LICENSE NO.  
22745

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22nd day of November 1986

the following persons were by me united in marriage at Lonaconing, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38391

|                              |                                            |                    |                      |            |            |
|------------------------------|--------------------------------------------|--------------------|----------------------|------------|------------|
| Groom's Name                 | <b>Bernard Clark Booth, Jr.</b>            | Age                | <b>18</b>            | Birthplace | <b>Md.</b> |
| Groom's Residence            | <b>Legislative Rd. Barton Allegany Md.</b> | Marital Status     | <b>Never Married</b> |            |            |
| Bride's Name                 | <b>Louise Ann Frame</b>                    | Age                | <b>18</b>            | Birthplace | <b>Md.</b> |
| Bride's Residence            | <b>P. O. Box 299 Midland Allegany Md.</b>  | Marital Status     | <b>Never Married</b> |            |            |
| Relationship to groom if any |                                            | <b>Not related</b> |                      |            |            |

Rev. George R. Loard

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 5,** **86**

Pastor - Bethel Holiness Church

Title and Religious Denomination or Office

Rt. 1 Box 239., Frostburg, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov. 26, 1986

License Fee \$ 18.00

*Elizabeth A. Haden*  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38744

LICENSE NO.  
22739

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.  
**38386**

|                              |                                     |                |                      |            |                       |
|------------------------------|-------------------------------------|----------------|----------------------|------------|-----------------------|
| Groom's Name                 | <b>Todd Alan Deatelhauser</b>       | Age            | <b>18</b>            | Birthplace | <b>Md.</b><br>(State) |
| Groom's Residence            | <b>901 Harding Ave.</b>             |                |                      |            |                       |
|                              | <b>Cumberland Allegany Maryland</b> | Marital Status | <b>Never married</b> |            |                       |
| Bride's Name                 | <b>Christina Lynn Schlereth</b>     | Age            | <b>18</b>            | Birthplace | <b>Md.</b><br>(State) |
| Bride's Residence            | <b>531 Winifred Rd.</b>             |                |                      |            |                       |
|                              | <b>Cumberland Allegany Maryland</b> | Marital Status | <b>Never married</b> |            |                       |
| Relationship to groom if any | <b>Not related</b>                  |                |                      |            |                       |

Rev. Wayne R. Turner

Name of Officiating Clergy or Authorized Officer

License Date **October 31** **86**

Elder: The United Methodist Church

Title and Religious Denomination or Office

233 Race St., Cumberland, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov. 22, 1986

License Fee \$ 18.00

*Wayne R. Turner*  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38745

LICENSE NO.  
 22783

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38399**

|                              |                                                        |                    |                      |            |                       |
|------------------------------|--------------------------------------------------------|--------------------|----------------------|------------|-----------------------|
| Groom's Name                 | <b>Timothy Allen Rice</b>                              | Age                | <b>28</b>            | Birthplace | <b>Md.</b><br>(State) |
| Groom's Residence            | <b>11700 Eagle Ave SW.<br/>Cumberland Allegany Md.</b> | Marital Status     | <b>Never Married</b> |            |                       |
| Bride's Name                 | <b>Sandra Kay Sheetz</b>                               | Age                | <b>23</b>            | Birthplace | <b>Md.</b><br>(State) |
| Bride's Residence            | <b>534 Necessity St.<br/>Cumberland Allegany Md.</b>   | Marital Status     | <b>Never Married</b> |            |                       |
| Relationship to groom if any |                                                        | <b>Not related</b> |                      |            |                       |

Robert Webel

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 18, 86**

Pastor, Bedford Road Baptist Church

Title and Religious Denomination or Office

Rt. 3 Box 251., Cumberland, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 26, 1986

License Fee \$ 18.00

*[Signature]*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38746

LICENSE NO.  
22775

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Rawlings, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38422

|                   |                            |            |                |                      |            |
|-------------------|----------------------------|------------|----------------|----------------------|------------|
| Groom's Name      | <b>Erik David Phillips</b> | Age        | <b>29</b>      | Birthplace           | <b>Md.</b> |
|                   |                            |            |                | (State)              |            |
| Groom's Residence | <b>546 Park Ave.</b>       |            |                |                      |            |
|                   | <b>LaVale Allegany</b>     | <b>Md.</b> | Marital Status | <b>Never Married</b> |            |
| Bride's Name      | <b>Diana Lynn Woods</b>    | Age        | <b>28</b>      | Birthplace           | <b>Md.</b> |
|                   |                            |            |                | (State)              |            |
| Bride's Residence | <b>102 W. St.</b>          |            |                |                      |            |
|                   | <b>LaVale Allegany</b>     | <b>Md.</b> | Marital Status | <b>Divorced</b>      |            |

Relationship to groom if any **Not related**

Lowell S. Garland

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 14,** **86**

Minister, Rawlings U. M. C.

Title and Religious Denomination or Office

Rawlings, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
November 15, 1986

office on

License Fee \$ \_\_\_\_\_

*[Signature]*

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38747

LICENSE NO.  
22706

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Cumberland, Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38349

|                              |                                     |  |                |                 |            |            |         |
|------------------------------|-------------------------------------|--|----------------|-----------------|------------|------------|---------|
| Groom's                      |                                     |  |                |                 |            |            |         |
| Name                         | <b>Robert Joseph Klipstein</b>      |  | Age            | <b>37</b>       | Birthplace | <b>Md.</b> | (State) |
| Groom's                      | <b>11608 Olive Ave.</b>             |  |                |                 |            |            |         |
| Residence                    | <b>Cumberland Allegany Maryland</b> |  | Marital Status | <b>Divorced</b> |            |            |         |
| Bride's                      |                                     |  |                |                 |            |            |         |
| Name                         | <b>Doris Esther Horton</b>          |  | Age            | <b>46</b>       | Birthplace | <b>Md.</b> | (State) |
| Bride's                      | <b>11608 Olive Ave.</b>             |  |                |                 |            |            |         |
| Residence                    | <b>Cumberland Allegany Maryland</b> |  | Marital Status | <b>Widow</b>    |            |            |         |
| Relationship to groom if any | <b>Not related</b>                  |  |                |                 |            |            |         |

Rev. Marlin H. Lauver

Name of Officiating Clergy or Authorized Officer

License Date **October 20** **86**

**Minister - United Methodist Church**

Title and Religious Denomination or Office

**12011 Marigold Ave. SW., Cumberland, Md.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **Nov. 18, 1986**

License Fee \$ **18.00**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38748

LICENSE NO.  
 22678

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Cresaptown, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38320**

|                   |                                                |                |                 |            |                                      |
|-------------------|------------------------------------------------|----------------|-----------------|------------|--------------------------------------|
| Groom's Name      | <b>Ronald Kenneth Winters, Sr.</b>             | Age            | <b>38</b>       | Birthplace | <b>Md.</b><br><small>(State)</small> |
| Groom's Residence | <b>Rt. 3 Box 274<br/>Rawlings Allegany Md.</b> | Marital Status | <b>Divorced</b> |            |                                      |
| Bride's Name      | <b>Eva Mae Casteel</b>                         | Age            | <b>32</b>       | Birthplace | <b>Md.</b><br><small>(State)</small> |
| Bride's Residence | <b>Rt. 3 Box 274<br/>Rawlings Allegany Md.</b> | Marital Status | <b>Divorced</b> |            |                                      |

Relationship to groom if any **Not related**

Harold R. McClay, Jr.Name of Officiating Clergy or Authorized OfficerLicense Date **Oct. 10,****86**United Methodist ClergymanTitle and Religious Denomination or OfficeCresaptown, Md.Address of Clergy or Authorized Officer**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 18, 1986

License Fee \$ **18.00**

*Ernest A. Haden*  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38749

LICENSE NO.  
 22686

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Frostburg, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38313**

|                              |                                                      |                    |                |                      |                                        |
|------------------------------|------------------------------------------------------|--------------------|----------------|----------------------|----------------------------------------|
| Groom's Name                 | <b>David Scott Beck</b>                              | Age                | <b>25</b>      | Birthplace           | <b>Va.</b><br><small>(State)</small>   |
| Groom's Residence            | <b>13043 Dairymaid Dr.<br/>Germantown Montgomery</b> | Md.                | Marital Status | <b>Never Married</b> |                                        |
| Bride's Name                 | <b>Traci Lyn Potts</b>                               | Age                | <b>23</b>      | Birthplace           | <b>S. C.</b><br><small>(State)</small> |
| Bride's Residence            | <b>9223 Shelton St.<br/>Bethesda Montgomery</b>      | Md.                | Marital Status | <b>Divorced</b>      |                                        |
| Relationship to groom if any |                                                      | <b>Not related</b> |                |                      |                                        |

John T. Potts, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 15,**

**86**

Minister of God's - Ark of Safety

Title and Religious Denomination or Office

P.O. Box 52, Frostburg, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

License Fee \$ 18.00

*[Signature]*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38750

LICENSE NO.  
22591

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 14th day of November 19 86

the following persons were by me united in marriage at Westernport, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38230

|                              |                                       |        |                              |
|------------------------------|---------------------------------------|--------|------------------------------|
| Groom's Name                 | Thomas Joseph Williams                | Age 26 | Birthplace Md.               |
| Groom's Residence            | 308 White Street Westernport Allegany | Md.    | Marital Status Never Married |
| Bride's Name                 | Connie Sue Butts                      | Age 23 | Birthplace Md.               |
| Bride's Residence            | 308 White St. Westernport Allegany    | Md.    | Marital Status Never Married |
| Relationship to groom if any | Not related                           |        |                              |

Rev. James D. Lopes

Name of Officiating Clergy or Authorized Officer

License Date Sept. 10, 86

Minister, Pentecostal Holiness Church

Title and Religious Denomination or Office

208 Marsh Ave., Westernport, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

Nov. 14, 1986

License Fee \$ 18.00

Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38751

LICENSE NO.  
22769

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38404**

|                              |                              |            |                |                      |                       |
|------------------------------|------------------------------|------------|----------------|----------------------|-----------------------|
| Groom's Name                 | <b>Larry Allen Valentine</b> | Age        | <b>20</b>      | Birthplace           | <b>Md.</b><br>(State) |
| Groom's Residence            | <b>322 Reservoir Ave.</b>    |            |                |                      |                       |
|                              | <b>Cumberland Allegany</b>   | <b>Md.</b> | Marital Status | <b>Never Married</b> |                       |
| Bride's Name                 | <b>Beverly Kay Hall</b>      | Age        | <b>24</b>      | Birthplace           | <b>Md.</b><br>(State) |
| Bride's Residence            | <b>P. O. Box 5067</b>        |            |                |                      |                       |
|                              | <b>Cresaptown Allegany</b>   | <b>Md.</b> | Marital Status | <b>Never Married</b> |                       |
| Relationship to groom if any | <b>Not related</b>           |            |                |                      |                       |

Rev. Wayne Benack

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 12,**

**86**

Pastor of Grace Community Church

Title and Religious Denomination or Office

1005 Bishop Walsh Rd., Cumberland, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this office on Nov. 17, 1986

License Fee \$ 18.00

*Wayne Benack*  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38752

LICENSE NO.  
 22756

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 11th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38400

|                   |                                              |               |                                                 |
|-------------------|----------------------------------------------|---------------|-------------------------------------------------|
| Groom's Name      | <b>Jeffrey Allen Nines</b>                   | Age <b>19</b> | Birthplace <b>Md.</b><br><small>(State)</small> |
| Groom's Residence | <b>10 Mary St.<br/>Cumberland Allegany</b>   | <b>Md.</b>    | Marital Status <b>Never Married</b>             |
| Bride's Name      | <b>Patricia Sue Grabenstein</b>              | Age <b>17</b> | Birthplace <b>Md.</b><br><small>(State)</small> |
| Bride's Residence | <b>Rt. 4 Box 186<br/>Cumbreland Allegany</b> | <b>Md.</b>    | Marital Status <b>Never Married</b>             |

Relationship to groom if any

**Not related**

**Parent Consent**

License Date **Nov. 7,** **86**

Robert L. Nair  
Name of Officiating Clergy or Authorized Officer

Minister, United Methodist Church  
Title and Religious Denomination or Office

27 Humbird St., Cumberland, Maryland  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 17, 1986

License Fee \$ 18.00

*[Signature]*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38753

LICENSE NO.

22767

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 10th day of November 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38406

|                              |                            |                 |                 |                |                      |
|------------------------------|----------------------------|-----------------|-----------------|----------------|----------------------|
| Groom's Name                 | <b>Darrel Kevin Bailey</b> | Age             | <b>18</b>       | Birthplace     | <b>Md.</b>           |
|                              |                            |                 |                 | (State)        |                      |
| Groom's Residence            | <b>109 Polk St.</b>        |                 |                 |                |                      |
|                              | <b>Cumberland</b>          | <b>Allegany</b> | <b>Maryland</b> | Marital Status | <b>Never married</b> |
| Bride's Name                 | <b>Vicki Lee Schell</b>    | Age             | <b>21</b>       | Birthplace     | <b>Md.</b>           |
|                              |                            |                 |                 | (State)        |                      |
| Bride's Residence            | <b>243 Davidson St.</b>    |                 |                 |                |                      |
|                              | <b>Cumberland</b>          | <b>Allegany</b> | <b>Maryland</b> | Marital Status | <b>Never married</b> |
| Relationship to groom if any | <b>Not related</b>         |                 |                 |                |                      |

Rev. Daniel E. Arciaga

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 10** **86**Minister, First Christian Church

Title and Religious Denomination or Office

312 Bedford St., Cumberland, Md.

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 12, 1986License Fee \$ 18.00
  
Signature — Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38754

LICENSE NO.  
 22758

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 8th day of Nov. 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38379

|                              |                             |            |    |                        |                              |
|------------------------------|-----------------------------|------------|----|------------------------|------------------------------|
| Groom's                      |                             |            |    |                        |                              |
| Name                         | Mark Alan Wright            | Age        | 23 | Birthplace             | Md.                          |
|                              |                             |            |    | <small>(State)</small> |                              |
| Groom's                      | 396 N. Summit Ave. Apt. 103 |            |    |                        |                              |
| Residence                    | Gaithersburg                | Montgomery |    | Md.                    | Marital Status Never Married |
| Bride's                      |                             |            |    |                        |                              |
| Name                         | Denise Laray Ruppenkamp     | Age        | 25 | Birthplace             | Md.                          |
|                              |                             |            |    | <small>(State)</small> |                              |
| Bride's                      | 396 N. Summit Ave. Apt. 103 |            |    |                        |                              |
| Residence                    | Gaithersburg                | Montgomery |    | Md.                    | Marital Status Never Married |
|                              |                             |            |    |                        |                              |
| Relationship to groom if any |                             |            |    | Not related            |                              |

Rev. Fr. Marion F. Helowicz

Name of Officiating Clergy or Authorized Officer

License Date Nov. 7,

86

Priest of the Roman Catholic Church

Title and Religious Denomination or Office

300 Oldtown Rd., Cumbelrnad, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 12, 1986

License Fee \$ 18.00

*Byronal H. Nelson*  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38755

LICENSE NO.  
22491

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at LaVale, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.  
**38109**

|                              |                               |            |                |                 |            |
|------------------------------|-------------------------------|------------|----------------|-----------------|------------|
| Groom's Name                 | <b>John Maurice Huston</b>    | Age        | <b>35</b>      | Birthplace      | <b>Pa.</b> |
|                              |                               |            |                | (State)         |            |
| Groom's Residence            | <b>RD 1 Box 124 A</b>         |            |                |                 |            |
|                              | <b>Mt. Savage Allegany</b>    | <b>Md.</b> | Marital Status | <b>Divorced</b> |            |
| Bride's Name                 | <b>Julia Elizabeth Connor</b> | Age        | <b>31</b>      | Birthplace      | <b>Md.</b> |
|                              |                               |            |                | (State)         |            |
| Bride's Residence            | <b>Rt. 1 Box 124 A</b>        |            |                |                 |            |
|                              | <b>Mt. Savage Allegany</b>    | <b>Md.</b> | Marital Status | <b>Divorced</b> |            |
| Relationship to groom if any | <b>Not related</b>            |            |                |                 |            |

Rev. Harold W. Crabtree

Name of Officiating Clergy or Authorized Officer

License Date **Aug. 8, 86**

Minister of the Gospel

Title and Religious Denomination or Office

5 Parkside Blvd., LaVale, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

Nov 12 1986

License Fee \$ **18.00**

*Raymond H. Haller*  
Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38756

LICENSE NO.  
 22726

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Spring Gap, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38374**

|                              |                                 |            |                |                 |                                         |
|------------------------------|---------------------------------|------------|----------------|-----------------|-----------------------------------------|
| Groom's Name                 | <b>George Ellis Rose</b>        | Age        | <b>44</b>      | Birthplace      | <b>Md..</b><br><small>(State)</small>   |
| Groom's Residence            | <b>Rt 4 Box 7 D Oldtown Rd.</b> |            |                |                 |                                         |
|                              | <b>Cumberland Allegany</b>      | <b>Md.</b> | Marital Status | <b>Divorced</b> |                                         |
| Bride's Name                 | <b>Lorena Lynn Adams</b>        | Age        | <b>25</b>      | Birthplace      | <b>W. Va.</b><br><small>(State)</small> |
| Bride's Residence            | <b>Rt 4 Box 7 D Oldtown Rd.</b> |            |                |                 |                                         |
|                              | <b>Cumberland Allegany</b>      | <b>Md.</b> | Marital Status | <b>Divorced</b> |                                         |
| Relationship to groom if any | <b>Not related</b>              |            |                |                 |                                         |

Carlee L. Hallman

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 27,**

**86** United Methodist Church Minsiter

Title and Religious Denomination or Office

Rt. 1 Box 19., Oldtown, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 17, 1986

License Fee \$ \_\_\_\_\_

*Carlee L. Hallman*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

86-38757

## State of Maryland

LICENSE NO.

22638

Copy for State Department of Health and Mental Hygiene

### ALLEGANY COUNTY (01)

*I Hereby Certify* that on the 8th day of November 1986

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38246

Groom's

Name

Robert Raymond Mullin

Age 24

Birthplace

Md.

(State)

Groom's

Residence

Milestone Garden Apts., Apt. 8 A

Williamsport

Washington

Maryland

Marital Status

Divorced

Bride's

Name

Kelly Rae Bailey

Age 20

Birthplace

Md.

(State)

Bride's

Residence

Milestone Garden Apts., Apt. 8 A

Williamsport

Washington

Maryland

Marital Status

Never married

Relationship to groom if any

Not related

Rev. Earl E. Mason

Name of Officiating Clergy or Authorized Officer

License Date Sept. 26

86

Pastor of Kingsley United Methodist Church

Title and Religious Denomination or Office

1021 Kent Ave., Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

Nov 10 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38758

LICENSE NO.  
 22746

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38393

|                              |                                                |                    |                |                      |                                      |
|------------------------------|------------------------------------------------|--------------------|----------------|----------------------|--------------------------------------|
| Groom's Name                 | <b>Nicholas James Monteleone</b>               | Age                | <b>30</b>      | Birthplace           | <b>Md.</b><br><small>(State)</small> |
| Groom's Residence            | <b>117 Jackson St.<br/>Cumberland Allegany</b> | Md.                | Marital Status | <b>Never Married</b> |                                      |
| Bride's Name                 | <b>Donna Marie Diamond</b>                     | Age                | <b>31</b>      | Birthplace           | <b>Md.</b><br><small>(State)</small> |
| Bride's Residence            | <b>110 Porter St.<br/>LaVale Allegany</b>      | Md.                | Marital Status | <b>Never Married</b> |                                      |
| Relationship to groom if any |                                                | <b>Not related</b> |                |                      |                                      |

James O. McGovern  
Name of Officiating Clergy or Authorized Officer

License Date **Nov. 5,** **86** Priest, Roman Catholic  
Title and Religious Denomination or Office

201 N. Centre St., Cumberland, Md.  
Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 10, 1986

License Fee \$ **18.00**

*Raymond A. Haden*  
Signature of Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38759

LICENSE NO.

22733

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Frostburg, Maryland

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38383

|                              |                            |            |                |                      |            |
|------------------------------|----------------------------|------------|----------------|----------------------|------------|
| Groom's Name                 | <b>James Lee Stewart</b>   | Age        | <b>59</b>      | Birthplace           | <b>Md.</b> |
|                              |                            |            |                | (State)              |            |
| Groom's Residence            | <b>315 Frederick St.</b>   |            |                |                      |            |
|                              | <b>Cumberland Allegany</b> | <b>Md.</b> | Marital Status | <b>Never Married</b> |            |
| Bride's Name                 | <b>Doris Mae Fox</b>       | Age        | <b>60</b>      | Birthplace           | <b>Pa.</b> |
|                              |                            |            |                | (State)              |            |
| Bride's Residence            | <b>315 Frederick St.</b>   |            |                |                      |            |
|                              | <b>Cumberland Allegany</b> | <b>Md.</b> | Marital Status | <b>Divorced</b>      |            |
| Relationship to groom if any | <b>Not related</b>         |            |                |                      |            |

Rev. Richard A. Harris

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 30,**

866

**Pastor, First English Baptist Church**

Title and Religious Denomination or Office

**130 E. Main St., Frostburg, Md.**

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 3, 1986

License Fee \$ **18.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38760

LICENSE NO.  
 22740

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 29th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38381

|                              |                                                    |                    |                 |            |                          |
|------------------------------|----------------------------------------------------|--------------------|-----------------|------------|--------------------------|
| Groom's Name                 | <b>Mark Raymond Alexander</b>                      | Age                | <b>27</b>       | Birthplace | <b>W. Va.</b><br>(State) |
| Groom's Residence            | <b>409 Walnut St.<br/>Westernport Allegany Md.</b> | Marital Status     | <b>Divorced</b> |            |                          |
| Bride's Name                 | <b>Deborah Gay Lyons</b>                           | Age                | <b>24</b>       | Birthplace | <b>W. Va.</b><br>(State) |
| Bride's Residence            | <b>76 Main St.<br/>Westernport Allegany Md.</b>    | Marital Status     | <b>Divorced</b> |            |                          |
| Relationship to groom if any |                                                    | <b>Not related</b> |                 |            |                          |

Rev. Timothy M. Lanier

Name of Officiating Clergy or Authorized Officer

License Date **NOVEMBER 3,** 86

Pastor - Church of God

Title and Religious Denomination or Office

1345 Beacon St., Keyser, W.Va.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Dec 2, 1986

License Fee \$ 18.00

*Raymond A. Haden*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38761

LICENSE NO.  
 22780

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 29th day of November 19 86

the following persons were by me united in marriage at Frostburg, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38424

|                              |                                 |                |                        |
|------------------------------|---------------------------------|----------------|------------------------|
| Groom's Name                 | David Clyde Beeman              | Age 29         | Birthplace Ohio        |
|                              |                                 |                | <small>(State)</small> |
| Groom's Residence            | Winterwood Village Apts Apt B 8 |                |                        |
|                              | Frostburg Allegany Maryland     | Marital Status | Divorced               |
| Bride's Name                 | Gail Lynn Goldsworthy           | Age 27         | Birthplace Maryland    |
|                              |                                 |                | <small>(State)</small> |
| Bride's Residence            | Winterwood Village Apts Apt B 8 |                |                        |
|                              | Frostburg Allegany Maryland     | Marital Status | Single                 |
| Relationship to groom if any | Not Related                     |                |                        |

Rev. Homer L. Beeman

Name of Officiating Clergy or Authorized Officer

License Date Nov 17 86

Pastor - Baptist

Title and Religious Denomination or Office

Rt. 1 Box 100, Keyser, W.Va.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this office on Dec. 2, 1986

License Fee \$ 18.00

*Clyde A. Hallen*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38762

LICENSE NO.  
22596

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Frostburg, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38233

|                              |                                      |                 |            |                |                       |
|------------------------------|--------------------------------------|-----------------|------------|----------------|-----------------------|
| Groom's Name                 | <b>Roy Edgar Robertson</b>           | Age             | <b>22</b>  | Birthplace     | <b>Md.</b><br>(State) |
| Groom's Residence            | <b>Rt. 8 Box 466<br/>Cumberland</b>  | <b>Allegany</b> | <b>Md.</b> | Marital Status | <b>Never married</b>  |
| Bride's Name                 | <b>Kimberly Sue Beal</b>             | Age             | <b>19</b>  | Birthplace     | <b>Md.</b><br>(State) |
| Bride's Residence            | <b>50 Powells Lane<br/>Frostburg</b> | <b>Allegany</b> | <b>Md.</b> | Marital Status | <b>Never married</b>  |
| Relationship to groom if any | <b>Not related</b>                   |                 |            |                |                       |

License Date **Sept. 11,** 86

Kenneth M. Humbert

Name of Officiating Clergy or Authorized Officer

Elder, The United Methodist Church

Title and Religious Denomination or Office

46 W. Main St., Frostburg, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
November 5, 1986

office of

License Fee \$ \_\_\_\_\_

*[Signature]*

Signature - Clerk of the Court



2

## Certificate of Marriage

86-38763

State of Maryland

LICENSE NO.

22808

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 28th day of November 1986

the following persons were by me united in marriage at Cresaptown, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38456

Groom's

Name Glidden Hugh McCooale

Age 26 Birthplace W. Va.  
(State)

Groom's 127 E. Leicester St.

Residence Winchester

Virginia

Marital Status Divorced

Bride's

Name Renee Jeanette Slider

Age 22 Birthplace Pa.  
(State)

Bride's 127 E. Leicester St.

Residence Winchester

Virginia

Marital Status Never Married

Relationship to groom if any Not related

Gary L. Grodon

Name of Officiating Clergy or Authorized Officer

License Date Nov. 29,

86 Minister, Liberty Temple Inc.

Title and Religious Denomination or Office

Rt. 1 Box 474., Frostburg, Md.

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Dec. 2, 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38764

LICENSE NO.  
 22806

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 28th day of November 19 86

the following persons were by me united in marriage at Midland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38409

|                   |                                           |                 |                |                 |            |                                      |
|-------------------|-------------------------------------------|-----------------|----------------|-----------------|------------|--------------------------------------|
| Groom's Name      | <b>Raymond Melroy Thrasher, Jr.</b>       | <u>25</u>       | Age            | <b>40</b>       | Birthplace | <b>Md.</b><br><small>(State)</small> |
| Groom's Residence | <b>P. O. Box 206<br/>Midland Allegany</b> | <b>Md.</b>      | Marital Status | <b>Divorced</b> |            |                                      |
| Bride's Name      | <b>Carolyn Sue Stafford</b>               | <u>83</u>       | Age            | <b>24</b>       | Birthplace | <b>Md.</b><br><small>(State)</small> |
| Bride's Residence | <b>116½ W. Germain St.<br/>Winchester</b> | <b>Virginia</b> | Marital Status | <b>Widow</b>    |            |                                      |

Relationship to groom if any **Not related**

John W. Taugher

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 28,**

**86**

Deacon, United Methodist Church

Title and Religious Denomination or Office

P. O. Box 15., Midland, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on December 2, 1986

License Fee \$ 18.00

*[Signature]*  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38765

LICENSE NO.  
 22736

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**85875**

|                              |                                         |     |           |                |                     |
|------------------------------|-----------------------------------------|-----|-----------|----------------|---------------------|
| Groom's Name                 | <b>Thomas George Romanak</b>            | Age | <b>34</b> | Birthplace     | <b>Pa.</b>          |
| Groom's Residence            | <b>1310 Virginia Ave.<br/>Johnstown</b> | Pa. |           | Marital Status | <b>Bevermarried</b> |
| Bride's Name                 | <b>Debra Maude Matotek</b>              | Age | <b>34</b> | Birthplace     | <b>Pa.</b>          |
| Bride's Residence            | <b>731 Coleman Ave.<br/>Johnstown</b>   | Pa. |           | Marital Status | <b>Divorced</b>     |
| Relationship to groom if any | <b>Not related</b>                      |     |           |                |                     |

Rev. Daniel E. Arciaga

Name of Officiating Clergy or Authorized Officer

License Date **October 30 86**

Minister, First Christian Church

Title and Religious Denomination or Office

312 Bedford St., Cumberland, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on NOVEMBER 11, 1986

License Fee \$ **18.00**

*G. Raymond H. Walker*  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38766

LICENSE NO.  
22776

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 29th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38421

|                              |                                                   |                    |                |                      |                             |
|------------------------------|---------------------------------------------------|--------------------|----------------|----------------------|-----------------------------|
| Groom's Name                 | <b>Tad Alan Davis</b>                             | Age                | <b>20</b>      | Birthplace           | <b>Wisconsin</b><br>(State) |
| Groom's Residence            | <b>542 Greene St.<br/>Cumberland Allegany</b>     | Pa.                | Marital Status | <b>Never Married</b> |                             |
| Bride's Name                 | <b>Amy Louise Reynolds</b>                        | Age                | <b>19</b>      | Birthplace           | <b>Md.</b><br>(State)       |
| Bride's Residence            | <b>615 Louisiana Ave.<br/>Cumberland Allegany</b> | Md.                | Marital Status | <b>Never Married</b> |                             |
| Relationship to groom if any |                                                   | <b>Not related</b> |                |                      |                             |

Donald L. Burggraf  
Name of Officiating Clergy or Authorized Officer

License Date **Nov. 14,** **86** Minister - Lutheran Church in America  
Title and Religious Denomination or Office

530 A St., LaVale, Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Dec 2 1986

License Fee \$ 18.00

G. Raymond H. Nelson  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38767

LICENSE NO.  
22639

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 29th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38183

|                   |                                                 |                         |                |                       |
|-------------------|-------------------------------------------------|-------------------------|----------------|-----------------------|
| Groom's Name      | <b>Eric Vaughn Neder</b>                        | <u>67</u> Age <b>27</b> | Birthplace     | <b>Md.</b><br>(State) |
| Groom's Residence | <b>P. O. Box 130 Sugar Hill<br/>Crown Point</b> | <b>New York</b>         | Marital Status | <b>Never Married</b>  |
| Bride's Name      | <b>Donna Jean Mummert</b>                       | <u>82</u> Age <b>24</b> | Birthplace     | <b>Md.</b><br>(State) |
| Bride's Residence | <b>65 Lakeshore Dr. Apt. 13<br/>Colchester</b>  | <b>Vermont</b>          | Marital Status | <b>Never Married</b>  |

Relationship to groom if any **Not related**

Rev. Wayne R. Turner

Name of Officiating Clergy or Authorized Officer

License Date **Sept. 26,**

**86** Elder: The United Methodist Church

Title and Religious Denomination or Office

233 Race St., Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Dec. 3, 1986

License Fee \$ 18.00

*Wayne R. Turner*  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38768

LICENSE NO.  
22735

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Oldtown, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38378

|                   |                                |                |                 |            |                          |
|-------------------|--------------------------------|----------------|-----------------|------------|--------------------------|
| Groom's Name      | <b>William Leroy Sponaugle</b> | Age            | <b>30</b>       | Birthplace | <b>Md.</b><br>(State)    |
| Groom's Residence | <b>309 Harrison St.</b>        |                |                 |            |                          |
|                   | <b>Cumberladd Allegany Md.</b> | Marital Status | <b>Divorced</b> |            |                          |
| Bride's Name      | <b>Christina Rae Michael</b>   | Age            | <b>40</b>       | Birthplace | <b>W. Va.</b><br>(State) |
| Bride's Residence | <b>P. O. Box 526</b>           |                |                 |            |                          |
|                   | <b>Paw Paw W. Va.</b>          | Marital Status | <b>Divorced</b> |            |                          |

Relationship to groom if any **Not related**

Rev. James L. Farrell

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 30,**

**86**

Pastor, Assembly of God

Title and Religious Denomination or Office

Rt. 29 Box 39., Paw Paw, W. Va.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on November 5, 1986

License Fee \$ 18.00

*Raymond A. Haden*  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38769

LICENSE NO.  
 22717

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Westernport, Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38368

|                   |                                            |                |                      |            |                   |
|-------------------|--------------------------------------------|----------------|----------------------|------------|-------------------|
| Groom's Name      | <b>Reginald Maxwell Heavener, Jr.</b>      | Age            | <b>22</b>            | Birthplace | <b>W.Va.</b>      |
| Groom's Residence | <b>Rt. 1 Box 130 B<br/>Keyser W. Va.</b>   |                |                      | (State)    |                   |
| Bride's Name      | <b>Monika Hannenberg</b>                   | Age            | <b>24</b>            | Birthplace | <b>W. Germany</b> |
| Bride's Residence | <b>Westbergerweg 2<br/>Hamm W. Germany</b> |                |                      | (State)    |                   |
|                   |                                            | Marital Status | <b>Never Married</b> |            |                   |
|                   |                                            | Marital Status | <b>Never Married</b> |            |                   |

Relationship to groom if any **Not related**

License Date **Oct. 23,** **86**

Rev. Timothy M. Lanier

Name of Officiating Clergy or Authorized Officer

Pastor - Keyser Church of God

Title and Religious Denomination or Office

1345 Beacon St., Keyser, W.Va.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on November 5, 1986

License Fee \$ 18.00

*Reginald M. Heavener*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38770

State of Maryland

LICENSE NO.

22709

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 8th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38304

Groom's Name Lee Edward Rembold 85 Age 36 Birthplace Md.  
 Groom's Residence P.O. Box 146 Keyser W. Va. Marital Status Divorced  
 Bride's Name Barbara Ann Brashear 25 Age 31 Birthplace Md.  
 Bride's Residence Rt. 1, Box 306 Frostburg Allegany Md. Marital Status Never married  
 Relationship to groom if any Not related

T. William Preston

Name of Officiating Clergy or Authorized Officer

License Date Oct. 22, 1986

Pastor, Church of the Brethren

Title and Religious Denomination or Office

Frostburg, Maryland

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

Nov. 10, 1986

License Fee \$ \_\_\_\_\_

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38771

## State of Maryland

LICENSE NO.

22744

Copy for State Department of Health and Mental Hygiene

### ALLEGANY COUNTY (01)

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Cresaptown, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38310

Groom's

Name **Brian Joseph Roschli**

25

Age 23

Birthplace

W. Va.

(State)

Groom's

495 Bourbon Street

Residence **Cumberland Allegany**Md. Marital Status **Never married**

Bride's

Name **Anna Christine Elaine Silva**

58

Age 23

Birthplace

D.C.

(State)

Bride's

59 Cambridge Road Apt 7

Residence **Woburn Mass.**Marital Status **Never married**

Relationship to groom if any

**Not related**Rev. Francis Roscetti

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 5, 86**Pastor - St. Ambrose Church

Title and Religious Denomination or Office

P. O. Box 5130., Cresaptown, Md.

Address of Clergy or Authorized Officer

#### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

Nov. 12, 1986

License Fee \$ \_\_\_\_\_

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38772

State of Maryland

LICENSE NO.

22630

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 8th day of November 19 86

the following persons were by me united in marriage at Cresaptown, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38267

|                              |                       |        |                |         |            |         |
|------------------------------|-----------------------|--------|----------------|---------|------------|---------|
| Groom's Name                 | Robert Carson Harper  | 85     | Age            | 69      | Birthplace | Md.     |
|                              |                       |        |                |         |            | (State) |
| Groom's Residence            | Rt. 1 Ridgeley        | W. Va. | Marital Status | Widower |            |         |
| Bride's Name                 | Alta Mae Shaw         |        | Age            | 69      | Birthplace | Md.     |
|                              |                       |        |                |         |            | (State) |
| Bride's Residence            | 11519 Woodruff Ave SW |        | Marital Status | Widow   |            |         |
|                              | Cumberland Allegany   | Md.    |                |         |            |         |
| Relationship to groom if any | Not related           |        |                |         |            |         |

License Date Sept. 25, 86

Harold McClay, Jr.

Name of Officiating Clergy or Authorized Officer

United Methodist Clergyman

Title and Religious Denomination or Office

Cresaptown, Md. 21502

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

November 17, 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38773

LICENSE NO.  
 22751

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at McCoole, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38394,  
 Groom's

Name

**Floyd Ernest Crawford**

Age 47 Birthplace W Va  
(State)

Groom's

**P O Box 338**

Residence

**Keyser**

**W Va**

Marital Status **Divorced**

Bride's

**Dorothy Jean Uber**

**85**

Age 32 Birthplace Virginia  
(State)

Name

**P O Box 338**

Bride's

**keyser**

**W Va** Marital Status **Never Married**

Residence

Relationship to groom if any **Not Related**

Rev. Jack Lease

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 6** **86**

Pastor, Branch Full Gospel Church

Title and Religious Denomination or Office

Rt. 3 Box 16 B., Rawlings, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 13, 1986

License Fee \$ 18.00

*Raymond A. Nelson*  
 \_\_\_\_\_  
 Signer

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38774

LICENSE NO.

22771

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Westernport, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38411

|                   |                                         |     |           |                |                                         |
|-------------------|-----------------------------------------|-----|-----------|----------------|-----------------------------------------|
| Groom's Name      | <b>Robert Craig Harman</b>              | Age | <b>24</b> | Birthplace     | <b>W. Va.</b><br><small>(State)</small> |
| Groom's Residence | <b>1090 Carolina Ave.<br/>Keyser</b>    |     |           | Marital Status | <b>Never Married</b>                    |
| Bride's Name      | <b>Catherine Sue Maynard</b>            | Age | <b>23</b> | Birthplace     | <b>W. Va.</b><br><small>(State)</small> |
| Bride's Residence | <b>180 W. Fairview St.<br/>Piedmont</b> |     |           | Marital Status | <b>Never Married</b>                    |

Relationship to groom if any **Not related**

Paul A. Byrnes

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 12,**

86

Pastor, St. Peter's Catholic Church

Title and Religious Denomination or Office

127 Church St., Westernport, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

November 18, 1986

License Fee \$ **18.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38775

LICENSE NO.  
22755

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 16th day of November 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38389

|                   |                                   |     |           |                |                       |
|-------------------|-----------------------------------|-----|-----------|----------------|-----------------------|
| Groom's Name      | <b>Charles Blake Keiper</b>       | Age | <b>20</b> | Birthplace     | <b>Md.</b><br>(State) |
| Groom's Residence | <b>P. O. Box 272<br/>Ridgeley</b> |     |           | Marital Status | <b>Never Married</b>  |
| Bride's Name      | <b>Angela Joy Taylor</b>          | Age | <b>17</b> | Birthplace     | <b>Md.</b><br>(State) |
| Bride's Residence | <b>P. O. Box 272<br/>Ridgeley</b> |     |           | Marital Status | <b>Never Married</b>  |

85

Relationship to groom if any **Not related**

Dr. John L. Huffaker  
Name of Officiating Clergy or Authorized Officer

License Date **Nov. 7, 86** Minister - Church of the Brethren  
Title and Religious Denomination or Office

Parent's Consent 1015 Kent Ave., Cumberland, Md.  
Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this office on Nov. 18, 1986

License Fee \$ 18.00

*Gregory A. Watson*  
Signature - Clerk of the Court



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38776

LICENSE NO.  
22715

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22 day of November 19 86

the following persons were by me united in marriage at LaVale, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38359

Groom's  
Name **Frederic Lane Hartsock**  
Groom's **Rt. 3 Box 260**  
Residence **Palmyra**

75  
**Pa.**

Age **21** Birthplace **Md.**  
(State)

Bride's  
Name **Susan Dianne Rexrode**  
Bride's **Rt. 3 Box 269 X**  
Residence **Rawlings Allegany**

25  
**Md.**

Marital Status **Never Married**

Age **21** Birthplace **Md.**  
(State)

Marital Status **Never Married**

Relationship to groom if any **Not related**

Richard A. Harris

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 23,**

**86**

Pastor, First English Baptist Church

Title and Religious Denomination or Office

130 E. Main St., Frosthurg, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 24, 1986

License Fee \$ 18.00

Richard A. Harris  
Signature Clerk of the Court





2

*Certificate of Marriage*  
*State of Maryland*

86-38777

LICENSE NO.  
 22773

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 16th day of November 1986

the following persons were by me united in marriage at Cumberland, Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38420

Groom's  
 Name **Grant William Shoemaker**  
 Groom's **Box 137**  
 Residence **Hyndman**

75  
**Pa.**

Age **20** Birthplace **Md.**  
 (State)

Marital Status **Never Married**

Bride's  
 Name **Cathy Sue Emerick**  
 Bride's **P. O. Box 208**  
 Residence **Wiley Ford**

85  
**W. Va.**

Age **22** Birthplace **Md.**  
 (State)

Marital Status **Never Married**

Relationship to groom if any

**Not related**

**Robert Webel**

Name of Officiating Clergy or Authorized Officer

**Pastor, Bedford Road Baptist Church**

Title and Religious Denomination or Office

**Rt. 3 Box 251., Cumberland, Md.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 20 1986

License Fee \$ 18.00

*Gyngene A. Hester*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38778

LICENSE NO.  
 22749

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 14th day of November 19 86

the following persons were by me united in marriage at McCoole, Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38390

|                              |                          |             |                |                |            |              |
|------------------------------|--------------------------|-------------|----------------|----------------|------------|--------------|
| Groom's Name                 | Kenneth Paul Morton      | 25          | Age            | 28             | Birthplace | MD (State)   |
| Groom's Residence            | 75 West St.<br>McCoole   | Allegany    | MD             | Marital Status | Divorced   |              |
| Bride's Name                 | Debra Lynn Parish        | 85          | Age            | 25             | Birthplace | W VA (State) |
| Bride's Residence            | Rt. 4, Box 335<br>Keyser | W VA        | Marital Status | Divorced       |            |              |
| Relationship to groom if any |                          | Not Related |                |                |            |              |

Robert C. VanGilder

Name of Officiating Clergy or Authorized Officer

License Date Nov. 6

86

Minister, United Methodist Church

Title and Religious Denomination or Office

P.O. Box 591., Keyser, W. Va.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 19, 1986

License Fee \$18.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38779

## State of Maryland

LICENSE NO.

22738

Copy for State Department of Health and Mental Hygiene

### ALLEGANY COUNTY (01)

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38385

Groom's

Name

Kenneth Clyde Sibley

Age 27

Birthplace FL

(State)

Groom's

Residence

5561 Dunloe Dr., Apt. 201  
Virginia Beach

VA

Marital Status Never Married

Bride's

Name

Mary Sydney Poling

Age 23

Birthplace

MD

(State)

Bride's

Residence

5561 Dunloe Dr., Apt. 201  
Virginia Beach

VA

Marital Status Never Married

Relationship to groom if any

Not Related

Rev. Jerry M. Cline

Name of Officiating Clergy or Authorized Officer

License Date October 31, 86

Minister - The United Methodist Church

Title and Religious Denomination or Office

26 E. Mary St., Cumberland, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

November 18, 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38780

LICENSE NO.  
 22766

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 15<sup>th</sup> day of November 19 86

the following persons were by me united in marriage at Frederick Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38412

|                   |                          |    |     |    |            |     |
|-------------------|--------------------------|----|-----|----|------------|-----|
| Groom's Name      | Dalton Warren Hillegass  | 25 | Age | 72 | Birthplace | Pa. |
|                   |                          |    |     |    | (State)    |     |
| Groom's Residence | 117 Washington St.       |    |     |    |            |     |
|                   | Frostburg Allegnay       |    |     |    |            |     |
|                   |                          |    |     |    |            |     |
| Bride's Name      | Thelma Marie Shuck       | 75 | Age | 62 | Birthplace | Pa. |
|                   |                          |    |     |    | (State)    |     |
| Bride's Residence | 549 D Friendship Village |    |     |    |            |     |
|                   | Bedford                  |    |     |    |            |     |
|                   |                          |    |     |    |            |     |
|                   |                          |    |     |    |            |     |

Relationship to groom if any **Not related**

John D. Moser

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 10,** **86**

**Presiding Elder** **Jehovah'S Witness**

Title and Religious Denomination or Office

**147 Melrose Ct.** **Frederick, Md.** **21701**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 21, 1986

License Fee \$ 18.00

*[Signature]*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38781

LICENSE NO.  
 22742

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 23rd day of November 19 86

the following persons were by me united in marriage at Frostburg, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38341

|                              |                                         |            |                |                      |            |
|------------------------------|-----------------------------------------|------------|----------------|----------------------|------------|
| Groom's Name                 | <b>Daniel Bryan Cullen</b>              | Age        | <b>28</b>      | Birthplace           | <b>Md.</b> |
| Groom's Residence            | <b>1415 Opequon Ave.<br/>Winchester</b> |            |                | (State)              |            |
| Bride's Name                 | <b>Deborah Ann Crabtree</b>             |            |                |                      |            |
| Bride's Residence            | <b>1415 Opequon Ave.<br/>Winchester</b> |            |                |                      |            |
|                              |                                         | <b>Va.</b> | Marital Status | <b>Never Married</b> |            |
|                              |                                         | Age        | <b>28</b>      | Birthplace           | <b>Md.</b> |
|                              |                                         |            |                | (State)              |            |
|                              |                                         | <b>Va.</b> | Marital Status | <b>Divorced</b>      |            |
| Relationship to groom if any | <b>Not related</b>                      |            |                |                      |            |

Everett J. Spence  
Name of Officiating Clergy or Authorized Officer

License Date **Nov. 5,** **86** Assoc. Pastor -God Ark of Safety, Inc.  
Title and Religious Denomination or Office

Rt. 2 Box 32., Frostburg, Md.  
Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 26, 1986

License Fee \$ 18.00

*Gregory A. Nelson*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38782

LICENSE NO.  
22737

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Frostburg, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38382

|                              |                                      |     |    |                       |                                     |
|------------------------------|--------------------------------------|-----|----|-----------------------|-------------------------------------|
| Groom's Name                 | <b>Jeffrey Scott Buffenmyer</b>      | Age | 20 | Birthplace            | <b>MD</b><br>(State)                |
| Groom's Residence            | <b>6532 Potters Rd.<br/>Matthews</b> |     |    | <b>North Carolina</b> | <b>Marital Status Never Married</b> |
| Bride's Name                 | <b>Sherry Lynne Arnold</b>           | Age | 21 | Birthplace            | <b>MD</b><br>(State)                |
| Bride's Residence            | <b>Rt. 2 Box 468<br/>Frostburg</b>   |     |    | <b>Allegany MD</b>    | <b>Marital Status Never Married</b> |
| Relationship to groom if any | <b>Not Related</b>                   |     |    |                       |                                     |

Richard A. Seaks

Name of Officiating Clergy or Authorized Officer

License Date **October 31, 86**

Lutheran Pastor

Title and Religious Denomination or Office

1601 Frederick St., Cumberland, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

Nov. 26, 1986

License Fee \$18.00

*Gregory H. Hader*  
Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38783

LICENSE NO.  
 22761

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Frostburg, Maryland  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38354

Groom's Name **Robert Allan Alpert**

Age **23** Birthplace **N J**  
 (State)

Groom's Residence **915 Troxel Road**  
**Lansdale**

**Pa** Marital Status **Never Married**

Bride's Name **Julie Anne Chabot**

Age **20** Birthplace **Maryland**  
 (State)

Bride's Residence **729 Valley View Drive**  
**LaVale Allegany**

**Maryland** Marital Status **Never Married**

Relationship to groom if any **Not Related**

**Kenneth M. Humbert**

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 7** **86**

**Elder, The United Methodist Church**

Title and Religious Denomination or Office

**46 W. Main St., Frostburg, Md.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **Nov. 26, 1986**

License Fee \$ **18.00**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38784

LICENSE NO.  
22805

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 29th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38451

|                   |                                          |     |           |                  |                                     |
|-------------------|------------------------------------------|-----|-----------|------------------|-------------------------------------|
| Groom's Name      | <b>Kenneth Dow Green</b>                 | Age | <b>20</b> | Birthplace       | <b>Texas</b>                        |
|                   |                                          |     |           | (State)          |                                     |
| Groom's Residence | <b>6510 o/m Sport Rd.<br/>Shreveport</b> |     |           | <b>Louisiana</b> | <b>Marital Status Never Married</b> |
| Bride's Name      | <b>Linda Sue Mongold</b>                 | Age | <b>31</b> | Birthplace       | <b>Md.</b>                          |
|                   |                                          |     |           | (State)          |                                     |
| Bride's Residence | <b>6850 Klug Pine Rd.<br/>Shreveport</b> |     |           | <b>Louisiana</b> | <b>Marital Status Divorced</b>      |

Relationship to groom if any **Not related**

Lloyd McClarren

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 26,**

**86**

Minister, United Methodist Church

Title and Religious Denomination or Office

128 Virginia Ave., Cumberland, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

December 19 86

License Fee \$ \_\_\_\_\_

*Gywneth A. Hester*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38785

LICENSE NO.  
22757

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 28th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38387

|                   |                              |                    |                                  |
|-------------------|------------------------------|--------------------|----------------------------------|
| Groom's Name      | <b>Kenneth Eugene Oster</b>  | Age <b>53</b>      | Birthplace <b>Md.</b><br>(State) |
| Groom's Residence | <b>119 Virginia Ave.</b>     |                    |                                  |
| Bride's Name      | <b>Cynthia Lee Garner</b>    | Age <b>33</b>      | Birthplace <b>Md.</b><br>(State) |
| Bride's Residence | <b>Rear 30 Potomac St.</b>   |                    |                                  |
|                   | <b>Cumberland Allegany</b>   | <b>Md.</b>         | Marital Status <b>Divorced</b>   |
|                   | <b>Cumberland Allegany</b>   | <b>Md.</b>         | Marital Status <b>Divorced</b>   |
|                   | Relationship to groom if any | <b>Not related</b> |                                  |

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Maryland.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 28, 1986

License Fee \$ 18.00

*G. H. H. H.*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38786

LICENSE NO.

22704

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 9th day of November 1986

the following persons were by me united in marriage at Cresaptown, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.  
38318

|                              |                                                         |                    |                      |            |                       |
|------------------------------|---------------------------------------------------------|--------------------|----------------------|------------|-----------------------|
| Groom's Name                 | <b>Robert Allen Robison, Jr.</b>                        | Age                | <b>21</b>            | Birthplace | <b>Md.</b><br>(State) |
| Groom's Residence            | <b>PO Box 5333<br/>Cresaptown, Allegany C Maryland</b>  | Marital Status     | <b>Never married</b> |            |                       |
| Bride's Name                 | <b>Tammy Elizabeth Garlitz</b>                          | Age                | <b>19</b>            | Birthplace | <b>Md.</b><br>(State) |
| Bride's Residence            | <b>14403 Brant Rd.<br/>Cresaptown Allegany Maryland</b> | Marital Status     | <b>Never married</b> |            |                       |
| Relationship to groom if any |                                                         | <b>Not related</b> |                      |            |                       |

Harold R. McClay, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **October 20 86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Maryland

Address of Clergy or Authorized Officer

### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 23, 1986

License Fee \$ 18.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38787

State of Maryland

LICENSE NO.

22725

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 10th day of November 1986

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38371

|                   |                                            |                |               |            |     |
|-------------------|--------------------------------------------|----------------|---------------|------------|-----|
| Groom's Name      | Robert Lee Stitcher                        | Age            | 28            | Birthplace | Md. |
| Groom's Residence | 311 National Hwy.<br>LaVale Allegany Md.   | Marital Status | Never Married |            |     |
| Bride's Name      | Jill Renae Robertson                       | Age            | 20            | Birthplace | Md. |
| Bride's Residence | P. O. Box 69<br>Corriganville Allegany Md. | Marital Status | Never Married |            |     |

Relationship to groom if any Not related

Eleanor L. Albright

Name of Officiating Clergy or Authorized Officer

License Date Oct. 24,

86

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Md.

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on Nov. 10, 1986

License Fee \$ 18.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38788

LICENSE NO.  
22765

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 10th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38163

|                   |                          |     |    |                |               |
|-------------------|--------------------------|-----|----|----------------|---------------|
| Groom's Name      | Neil Miller Coleman      | Age | 32 | Birthplace     | Pa.           |
|                   |                          |     |    |                | (State)       |
| Groom's Residence | 10318 Crestmoor Dr.      |     |    | Marital Status | Never Married |
|                   | Silver Spring Montgomery | Md. |    |                |               |
| Bride's Name      | Kay (NMN) Casteel        | Age | 35 | Birthplace     | Md.           |
|                   |                          |     |    |                | (State)       |
| Bride's Residence | 10318 Crestmoor Dr.      |     |    | Marital Status | Divorced      |
|                   | Silver Spring Montgomery | Md. |    |                |               |

Relationship to groom if any **Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 10,**

**86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov 10 1986

License Fee \$ 18.00

*Gyorgy A. Nadeau*

Signature - Clerk of the Court





2

# Certificate of Marriage

86-38789

## State of Maryland

LICENSE NO.

22764

Copy for State Department of Health and Mental Hygiene

### ALLEGANY COUNTY (01)

I Hereby Certify that on the 10th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38402

Groom's

Name **Richard Walter Klein, Jr.**Age **26**Birthplace **Md.** (State)Groom's **320 W. Arden Road**Residence **Baltimore City****Maryland**Marital Status **Never married**

Bride's

Name **Patty Lynn Matthews**Age **16**Birthplace **Md.** (State)Bride's **14 W. Main St.**Residence **Frostburg****Allegany****Maryland**Marital Status **Never married**

Relationship to groom if any **Not related**

(Parents consent)

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 20****86**Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

Nov. 20, 1986

License Fee \$ **18.00**

*Byron A. Hester*  
Signature — Clerk of the Court

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38790

## State of Maryland

LICENSE NO.

22752

Copy for State Department of Health and Mental Hygiene

### ALLEGANY COUNTY (01)

*I Hereby Certify* that on the 7th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.  
38373

|                              |                                                          |                |               |             |
|------------------------------|----------------------------------------------------------|----------------|---------------|-------------|
| Groom's Name                 | Richard Lewis Cerutti                                    | Age 52         | Birthplace    | Pa. (State) |
| Groom's Residence            | 46 A Wilson Drive, Rt. 6<br>Cresaptown Allegany Maryland | Marital Status | Never married |             |
| Bride's Name                 | Mary Susan Straw                                         | Age 49         | Birthplace    | Md. (State) |
| Bride's Residence            | 615 N. Centre St.<br>Cumberland Allegany Maryland        | Marital Status | Divorced      |             |
| Relationship to groom if any |                                                          | Not related    |               |             |

Raymond W. Walker

Name of Officiating Clergy or Authorized Officer

License Date Nov. 5

86

Clerk of the Circuit Court

Title and Religious Denomination or Office

Allegany Co., Cumberland, Maryland

Address of Clergy or Authorized Officer

#### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov 7 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

State of Maryland

86-38791

LICENSE NO.

22728

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 7th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38363

|                              |                                        |        |                              |
|------------------------------|----------------------------------------|--------|------------------------------|
| Groom's Name                 | Roger Dean Bible                       | Age 23 | Birthplace Md.               |
|                              |                                        |        | (State)                      |
| Groom's Residence            | Rt. 1 Box 218 A<br>Flintstone Allegany | Md.    | Marital Status Never Married |
| Bride's Name                 | Brenda Lee Youngblood                  | Age 19 | Birthplace Md.               |
|                              |                                        |        | (State)                      |
| Bride's Residence            | Rt. 1 Box 218 A<br>Flintstone Allegany | Md.    | Marital Status Never Married |
| Relationship to groom if any | Not related                            |        |                              |

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date Oct. 27

86 Deputy Court Clerk

Title and Religious Denomination or Office

Allegheny Co., Cumberland, Maryland

Address of Clergy or Authorized Officer

8

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov. 7, 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38792

LICENSE NO.  
22759

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 7<sup>th</sup> day of November 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38384

|           |                           |            |           |                |                 |  |  |
|-----------|---------------------------|------------|-----------|----------------|-----------------|--|--|
| Groom's   |                           |            |           |                |                 |  |  |
| Name      | <b>Joe William Yates</b>  | Age        | <b>31</b> | Birthplace     | <b>Md.</b>      |  |  |
|           |                           |            |           |                | (State)         |  |  |
| Groom's   | <b>RFD 1 Box 343</b>      |            |           |                |                 |  |  |
| Residence | <b>Frostburg Allegany</b> | <b>Md.</b> |           | Marital Status | <b>Divorced</b> |  |  |
|           |                           |            |           |                |                 |  |  |
| Bride's   |                           |            |           |                |                 |  |  |
| Name      | <b>Cindy Sue Stakem</b>   | Age        | <b>29</b> | Birthplace     | <b>Md.</b>      |  |  |
|           |                           |            |           |                | (State)         |  |  |
| Bride's   | <b>61 Walnut St.</b>      |            |           |                |                 |  |  |
| Residence | <b>Frostburg Allegany</b> | <b>Md.</b> |           | Marital Status | <b>Divorced</b> |  |  |
|           |                           |            |           |                |                 |  |  |

Relationship to groom if any **Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 7, 86**

Deputy Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 7, 1986

License Fee \$ 18.00

*Elizabeth H. Haden*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

86-38793

LICENSE NO.  
22782

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 17th day of November 9 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38427

|                              |                                              |         |            |                |                           |
|------------------------------|----------------------------------------------|---------|------------|----------------|---------------------------|
| Groom's Name                 | <b>Eric Lynn Tribbey</b>                     | Age     | <b>35</b>  | Birthplace     | <b>Indiana</b><br>(State) |
| Groom's Residence            | <b>Pleasant Valley Rd.<br/>Mt. Lake Park</b> | Garrett | <b>Md.</b> | Marital Status | <b>Never Married</b>      |
| Bride's Name                 | <b>Margaret Ann Kaiser</b>                   | Age     | <b>34</b>  | Birthplace     | <b>Oregon</b><br>(State)  |
| Bride's Residence            | <b>Pleasant Valley Rd.<br/>Mt. Lake Park</b> | Garrett | <b>Md.</b> | Marital Status | <b>Never Married</b>      |
| Relationship to groom if any | <b>not related</b>                           |         |            |                |                           |

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 17,** **86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany Coutny., Cumberland, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on November 17, 1986

License Fee \$ 18.00

*Byron H. Nelson*  
Signature - Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38794

LICENSE NO.  
 22661

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 14th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38290**

|                              |                                                           |                                     |                                                      |
|------------------------------|-----------------------------------------------------------|-------------------------------------|------------------------------------------------------|
| Groom's Name                 | <b>Vincent Lawrence Lagrotteria</b>                       | Age <b>25</b>                       | Birthplace <b>New York</b><br><small>(State)</small> |
| Groom's Residence            | <b>182 Rear N. Centre St.<br/>Cumberland Allegany Md.</b> | Marital Status <b>Never Married</b> |                                                      |
| Bride's Name                 | <b>Elaine Francis Ellis</b>                               | Age <b>22</b>                       | Birthplace <b>Pa.</b><br><small>(State)</small>      |
| Bride's Residence            | <b>182 Rear N. Centre St.<br/>Cumberland Allegany Md.</b> | Marital Status <b>Never Married</b> |                                                      |
| Relationship to groom if any |                                                           | <b>Not related</b>                  |                                                      |

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 3, 86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany Co., Cumberland, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 14, 1986

License Fee \$ 18.00

*Cynthia A. Haller*

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38795

LICENSE NO.  
22785

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 21st day of November 7 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38430

|                              |                                    |            |                |                 |                       |
|------------------------------|------------------------------------|------------|----------------|-----------------|-----------------------|
| Groom's Name                 | <b>Frederick Alan Onkst</b>        | Age        | <b>39</b>      | Birthplace      | <b>Pa.</b><br>(State) |
| Groom's Residence            | <b>37 Brookeberry Dr. Apt. B 1</b> |            |                |                 |                       |
|                              | <b>Reistertown Baltimore</b>       | <b>Md.</b> | Marital Status | <b>Divorced</b> |                       |
| Bride's Name                 | <b>Holly Lynn Forbeck</b>          | Age        | <b>30</b>      | Birthplace      | <b>Md.</b><br>(State) |
| Bride's Residence            | <b>Rt. 3 Box 211 E</b>             |            |                |                 |                       |
|                              | <b>Cumberland Allegany</b>         | <b>Md.</b> | Marital Status | <b>Divorced</b> |                       |
| Relationship to groom if any | <b>Not related</b>                 |            |                |                 |                       |

Harold Burgess

Name of Officiating Clergy or Authorized Officer

Deputy Court Clerk

Title and Religious Denomination or Office

Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov. 21, 1986

License Fee \$ 18.00

*Cynthia A. Hester*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38796

LICENSE NO.  
 22796

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 24th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38441

|                   |                                              |                |                      |            |                                      |
|-------------------|----------------------------------------------|----------------|----------------------|------------|--------------------------------------|
| Groom's Name      | <b>Stephen Kenneth Hirschmugl</b>            | Age            | <b>28</b>            | Birthplace | <b>MO</b><br><small>(State)</small>  |
| Groom's Residence | <b>Rt. 2 Box 96<br/>Oldtown Allegany Md.</b> | Marital Status | <b>Never Married</b> |            |                                      |
| Bride's Name      | <b>Joy Ann Miller</b>                        | Age            | <b>32</b>            | Birthplace | <b>Md.</b><br><small>(State)</small> |
| Bride's Residence | <b>Rt. 2 Box 96<br/>Oldtown Allegany Md.</b> | Marital Status | <b>Divorced</b>      |            |                                      |

Relationship to groom if any **Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 24,**

86

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of record filed in this  
 office on November 2, 1986

License Fee \$ 18.00

*G. H. H. H.*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

3/19/1/00



2

*Certificate of Marriage*  
*State of Maryland*

86-38797

LICENSE NO.  
 22795

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 24th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38357

|                              |                                        |           |           |                        |                 |
|------------------------------|----------------------------------------|-----------|-----------|------------------------|-----------------|
| Groom's Name                 | <b>Archie John Skiles, Jr.</b>         | Age       | <b>48</b> | Birthplace             | <b>Pa.</b>      |
|                              |                                        |           |           | <small>(State)</small> |                 |
| Groom's Residence            | <b>Rd 1 Box 564<br/>McClellandtown</b> |           |           | <b>Pa.</b>             |                 |
|                              |                                        |           |           | Marital Status         | <b>Divorced</b> |
| Bride's Name                 | <b>Verna Mae Berry</b>                 | <b>75</b> | Age       | <b>36</b>              | Birthplace      |
|                              |                                        |           |           |                        | <b>N.J.</b>     |
| Bride's Residence            | <b>Rd 1 Box 564<br/>McClellandtown</b> |           |           | <b>Pa.</b>             |                 |
|                              |                                        |           |           | Marital Status         | <b>Divorced</b> |
| Relationship to groom if any | <b>Not related</b>                     |           |           |                        |                 |

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 24,** **86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County, Cumberland, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on November 24, 1986

License Fee \$ \_\_\_\_\_

*Byron H. Hester*  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38798

LICENSE NO.  
 22792

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 21st day of November 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38434

|                   |                       |          |                |          |            |     |
|-------------------|-----------------------|----------|----------------|----------|------------|-----|
| Groom's Name      | Stephen Hospodavis    | 25       | Age            | 44       | Birthplace | Pa. |
|                   |                       |          |                |          | (State)    |     |
| Groom's Residence | 115 Downing Street    |          |                |          |            |     |
|                   | Cumberland Allegany   | Mayrland | Marital Status | Divorced |            |     |
| Bride's Name      | Bonnetta Carol Marcus | 75       | Age            | 45       | Birthplace | Pa. |
|                   |                       |          |                |          | (State)    |     |
| Bride's Residence | 222 Morgantown Street |          |                |          |            |     |
|                   | Uniontown             | Pa.      | Marital Status | Divorced |            |     |

Relationship to groom if any

Not related

Raymond W. Walker

Name of Officiating Clergy or Authorized Officer

License Date Nov. 21 86

Clerk of the Circuit Court

Title and Religious Denomination or Office

Allegany Co., Cumberland, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

Nov. 21, 1986

License Fee \$ 18.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38793

LICENSE NO.  
22793

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 21st day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38426

Groom's  
Name **David Roy Crissey**  
Groom's **117 Hoover Ave.**  
Residence **Johnstown**

Age **33** Birthplace **Pa.**  
(State)  
Marital Status **Divorced**

Bride's  
Name **Barbara Ann Miller**  
Bride's **117 Hoover Ave.**  
Residence **Johnstown**

Age **33** Birthplace **Pa.**  
(State)  
Marital Status **Divorced**

Relationship to groom if any **Not related**

Eleanor L. Albright

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 21,** **86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on Nov. 21, 1986

License Fee \$ 18.00

*Eleanor L. Albright*  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38800

LICENSE NO.

22789

Copy for State Department of Health and Mental Hygiene.

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 20th day of November 19 86

the following persons were by me united in marriage at Cumberland, Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38438

Groom's  
Name

Robert Eugene Smith

Age 58 Birthplace Ohio  
(State)

Groom's  
Residence

Rt. 7 Box 112  
Newport

Ohio Marital Status Divorced

Bride's  
Name

Shirley Mae Shafer

72 Age 50 Birthplace Ohio  
(State)

Bride's  
Residence

P. O. Box 1142  
Marietta

Ohio Marital Status Divorced

Relationship to groom if any

Not related

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date Nov. 20,

86

Deputy Clerk

Title and Religious Denomination or Office

Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov. 20, 1986

License Fee \$ 18.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38801

LICENSE NO.  
 22790

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 20th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38436

Groom's  
 Name **Jesse C. Engleka**

Age **23** Birthplace **Pa.**  
 (State)

Groom's  
 Residence **RD 1 Box 61**  
**Rockwood**

**Pa.** Marital Status **Never Married**

Bride's  
 Name **Vietta Marie Hare**

Age **23** Birthplace **Pa.**  
 (State)

Bride's  
 Residence **517 W. Main St.**

**Pa.** Marital Status **Never Married**

Relationship to groom if any

**Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 20, 1986

License Fee \$ 18.00

*Raymond A. Hare*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38802

LICENSE NO.  
22791

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 20th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38440**

|                   |                            |                |                      |            |            |
|-------------------|----------------------------|----------------|----------------------|------------|------------|
| Groom's Name      | <b>Steve Lee Ice</b>       | Age            | <b>30</b>            | Birthplace | <b>Md.</b> |
| Groom's Residence | <b>2400 25th Ave.</b>      |                |                      |            |            |
| Bride's Name      | <b>Michelle Alane Lynn</b> | Age            | <b>25</b>            | Birthplace | <b>Pa.</b> |
| Bride's Residence | <b>943 29th St.</b>        |                |                      |            |            |
|                   |                            | Marital Status | <b>Never Married</b> |            |            |
|                   |                            | Marital Status | <b>Never Married</b> |            |            |

Relationship to groom if any **Not related**

License Date **Nov. 20,** **86**

Harold Burgess, Jr.  
Name of Officiating Clergy or Authorized Officer

Deputy Court Clerk

Title and Religious Denomination or Office  
Allegany County., Cumberland, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of record filed in this  
office on Nov. 20, 1986

License Fee \$ 18.00

G. M. H. H. H.  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38803

LICENSE NO.  
 22786

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 19th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38433

Groom's  
 Name **Gary John Josefowicz**

Age **47** Birthplace **Pa.**  
(State)

Groom's  
 Residence **6862 Belle Rd.**  
**Harborcreek**

**Pa.** Marital Status **Divorced**

Bride's  
 Name **Inez Gertrude Rollin**

Age **42** Birthplace **Pa.**  
(State)

Bride's  
 Residence **6862 Belle Rd.**  
**Harborcreek**

**Pa.** Marital Status **Divorced**

Relationship to groom if any

**Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 19 86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany Co., Cumberland, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 19, 1986

License Fee \$ \_\_\_\_\_

*Raymond H. Nelson*  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

86-38804

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 22334

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 17th day of November <sup>9</sup> 19 86

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

37966

|                              |                                   |                |                |
|------------------------------|-----------------------------------|----------------|----------------|
| Groom's Name                 | William Theodore Flanagan         | Age 35         | Birthplace Md. |
| Groom's Residence            | 13 Mineral St.<br>Ridgeley W. Va. | Marital Status | Divorced       |
| Bride's Name                 | Scharyl Pearl Flanagan            | Age 31         | Birthplace Pa. |
| Bride's Residence            | 13 Mineral St.<br>Ridgeley W. Va. | Marital Status | Divorced       |
| Relationship to groom if any | Not related - Re-Marriage         |                |                |

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **June 26, 86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegheny County., Cumberland, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

Nov. 14 1986

License Fee \$ 18.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38805

State of Maryland

LICENSE NO.

22777

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 14th day of November 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38410

Groom's

Name Clyde Wendolene Snyder

Age 54 Birthplace W. Va.  
(State)

Groom's Rt. 3 Box 13

Residence Moorefield

W. Va.

Marital Status Divorced

Bride's

Name Betty Joyce Bowen

85

Age 46 Birthplace Va.  
(State)

Bride's Rt. 3 Box 13

Residence Moorefield

W. Va.

Marital Status Divorced

Relationship to groom if any

Not related

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany Coutny., Cumbelrand, Md.

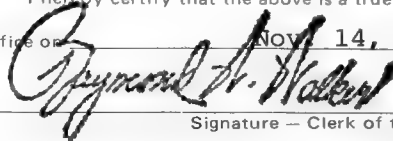
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov 14, 1986

License Fee \$ \_\_\_\_\_



Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38806

LICENSE NO.

22768

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 10th day of November 1986

the following persons were by me united in marriage at Cumberland, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38392

Groom's  
Name **Marvin Clinton Hott, Jr.**

Age **21** Birthplace **Md.**  
(State)

Groom's **Box 11**  
Residence **Springfield**

W. Va.

Marital Status **Never Married**

Bride's  
Name **Rhonda Lynn Puffinburger**

Age **20** Birthplace **Md.**  
(State)

Bride's **Star Rt. Box 73**  
Residence **Levels**

W. Va. Marital Status **Never Married**

Relationship to groom if any **Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 10,** **86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Md.

Address of Clergy or Authorized Officer

### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 10, 1986

License Fee \$ 18.00

Signature - Clyde A. Adams  
Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38807

LICENSE NO.  
 22762

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 7th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

**38396**

|                              |                                |                         |                                                 |
|------------------------------|--------------------------------|-------------------------|-------------------------------------------------|
| Groom's Name                 | <b>Mark Allen Weigle</b>       | Age <b>18</b>           | Birthplace <b>Pa.</b><br><small>(State)</small> |
| Groom's Residence            | <b>RD 1 Box 156<br/>Berlin</b> | <b>Pa.</b>              | Marital Status <b>Never Married</b>             |
| Bride's Name                 | <b>Marcy Lynn Gumbert</b>      | <b>75</b> Age <b>16</b> | Birthplace <b>Pa.</b><br><small>(State)</small> |
| Bride's Residence            | <b>Box 127<br/>Sipesville</b>  | <b>Pa.</b>              | Marital Status <b>Never Married</b>             |
| Relationship to groom if any | <b>Not related</b>             |                         |                                                 |

**Parent Consent**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 7,**

**86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany Co., Cumberland, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on November 7, 1986

License Fee \$ 18.00

*[Signature]*  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38808

LICENSE NO.  
 22743

Copy for State Department of Health and Mental Hygiene  
**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 5th day of November 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38395

Groom's  
 Name **Kenneth Eugene Shaffer**

Age **40** Birthplace **W. Va.**  
(State)

Groom's **Rd 1**  
 Residence **Markleton**

**Pa.** Marital Status **Divorced**

Bride's  
 Name **Susan Elizabeth Lung**

Age **28** Birthplace **Pa.**  
(State)

Bride's **Rd 1**  
 Residence **Markleton**

**Pa.** Marital Status **Divorced**

Relationship to groom if any

**Not related**

Harold Burgess, jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 5,** **86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany Coutny., Cumberland, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Nov 5, 1986

License Fee \$ \_\_\_\_\_

*Gy... ..*  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38809

LICENSE NO.  
22741

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 5th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38309

Groom's  
Name **Richard Peter Gregory**  
Groom's **P. O. Box 223**  
Residence **Shinnston**

Age **50** Birthplace **W. Va.**  
(State)

Bride's  
Name **Ruth Ellen Bittinger**  
Bride's **P. O. Box 86**  
Residence **Enterprise**

**W. Va.** Marital Status **Divorced**  
**25** Age **32** Birthplace **W. Va.**  
(State)

**W. Va.** Marital Status **Divorced**

Relationship to groom if any **Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 5,**

**86** Deputy Court Clerk

Title and Religious Denomination or Office

Allegany Coutny., Cumberland, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on November 5, 1986

License Fee \$ 18.00

*G. H. H. H.*

Signature — Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38810

LICENSE NO.  
22813

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 28th day of November 7 1986

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38458

|                   |                                      |                |                      |            |                        |
|-------------------|--------------------------------------|----------------|----------------------|------------|------------------------|
| Groom's Name      | <b>Richard Earl McDowell, II</b>     | Age            | <b>21</b>            | Birthplace | <b>Ohio</b><br>(State) |
| Groom's Residence | <b>P. O. Box 735<br/>Billington</b>  |                |                      |            |                        |
| Bride's Name      | <b>Lisa Marie Fish</b>               | Age            | <b>19</b>            | Birthplace | <b>Pa.</b><br>(State)  |
| Bride's Residence | <b>2266 Maple Ave.<br/>Lake City</b> |                |                      |            |                        |
|                   | <b>W. Va.</b>                        | Marital Status | <b>Divorced</b>      |            |                        |
|                   | <b>Pa.</b>                           | Marital Status | <b>Never Married</b> |            |                        |

Relationship to groom if any **Not related**

License Date **Nov. 28,** **86**

**Harold Burgess, Jr.**

Name of Officiating Clergy or Authorized Officer

**Deputy Court Clerk**

Title and Religious Denomination or Office

**Cumberland, Maryland**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
office on **Nov. 28, 1986**

License Fee \$ \_\_\_\_\_

*G. J. Walker*  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38811

LICENSE NO.

22810

Copy for State Department of Health and Mental Hygiene

## ALLEGANY COUNTY (01)

I Hereby Certify that on the 28th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38455

Groom's  
Name **Armand Leroy Boyd, Jr.**  
Groom's **942 Armfield Circle**  
Residence **Norfolk**

Virginia

Age **19** Birthplace **Md.**  
(State)

Marital Status **Never Married**

Bride's  
Name **Margaret Jane Prinkey**  
Bride's **Rt. 1 Box 205**  
Residence **Dunbar**

Pa.

Age **19** Birthplace **Pa.**  
(State)

Marital Status **Never Married**

Relationship to groom if any **Not related**

Harold Burgess, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 28, 86**

Deputy Court Clerk

Title and Religious Denomination or Office

Allegany County., Cumberland, Md.

Address of Clergy or Authorized Officer

### CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of record filed in this  
office on November 28, 1986

License Fee \$ **18.00**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38812

LICENSE NO.  
22772

Copy for State Department of Health and Mental Hygiene

**ALLEGANY COUNTY (01)**

*I Hereby Certify* that on the 28th day of November 9 19 86

the following persons were by me united in marriage at Cumberland, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

38419

|                              |                                                    |                |                      |            |                          |
|------------------------------|----------------------------------------------------|----------------|----------------------|------------|--------------------------|
| Groom's Name                 | <b>Cecil Leo Hollingworth</b>                      | Age            | <b>26</b>            | Birthplace | <b>W. Va.</b><br>(State) |
| Groom's Residence            | <b>231 Ward Ave.<br/>Keyser W. Va.</b>             | Marital Status | <b>Never Married</b> |            |                          |
| Bride's Name                 | <b>Iris Lorraine Winebrenner</b>                   | Age            | <b>31</b>            | Birthplace | <b>Md.</b><br>(State)    |
| Bride's Residence            | <b>218 Charles St.<br/>Cumberland Allegany Md.</b> | Marital Status | <b>Never Married</b> |            |                          |
| Relationship to groom if any | <b>Not related</b>                                 |                |                      |            |                          |

**Harold Burgess, Jr.**

Name of Officiating Clergy or Authorized Officer

**Deputy Court Clerk**

Title and Religious Denomination or Office

**Allegany County., Cumberland, Md.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this office on November 28, 1986

License Fee \$ **18.00**

*Raymond M. Haden*  
Signature - Clerk of Court





2

86-38813

## Certificate of Marriage

State of Maryland

LICENSE NO.

65320

Copy for State Department of Health and Mental Hygiene

ANNE ARUNDEL COUNTY (02)

I Hereby Certify that on the 25th day of October 19 86the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

MARK STEGA

Age 32

Birthplace MARYLAND  
(State)

Groom's

Residence

ANNAPOLIS, A.A.CO., MARYLAND

Marital Status

SINGLE

Bride's

Name

VICKI G. HARRISON

Age 35

Birthplace W.VIRGINIA  
(State)

Bride's

Residence

ANNAPOLIS, A.A.CO., MARYLAND

Marital Status

SINGLE

Relationship to groom if any

NONE

William H. Marquis

Name of Officiating Clergy or Authorized Officer

Presbyterian Minister

Title and Religious Denomination or Office

P.O. Box 1111, Arnold, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 11/20/86  
E. AUBREY COLLISON, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38814

LICENSE NO.

66282

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Annapolis, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

Jeffrey W. Wilson

Age

25

Birthplace

Maryland  
(State)

Groom's

Residence

Gaithersburg, Montg. Co., Maryland

Marital Status

Single

Bride's

Name

Virginia L. Atkins

Age

23

Birthplace

New York  
(State)

Bride's

Residence

Gaithersburg, Montg. Co., Maryland

Marital Status

Single

Relationship to groom if any

None

Joel Dan Lehman

Name of Officiating Clergy or Authorized Officer

License Date **Sept. 29** 86

Clergy- American Evangelical Church

Title and Religious Denomination or Office

3446 Pike Ridge Road, Edgewater, Md. 21037

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 3, 1986****E. AUBREY COLLISON, CLERK**License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38815

LICENSE NO.  
 64550

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 24th day of November 1986

the following persons were by me united in marriage at Severn, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**MILTON BOHN HILL, JR.**

Age 45

Birthplace MARYLAND  
(State)

Groom's  
 Residence

**SEVERN, A.A.CO., MARYLAND**

Marital Status **DIVORCED**

Bride's  
 Name

**BARBARA LANFORD BRUCE**

Age 35

Birthplace VIRGINIA  
(State)

Bride's  
 Residence

**SEVERN, A.A.CO., MARYLAND**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

Charles A. Donophan

Name of Officiating Clergy or Authorized Officer

License Date **JUNE 13th** 86

Psditor, Severn Unitd Methodist Church

Title and Religious Denomination or Office

1215 Old Camp Meade, Road, Severn MD 21114

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 28, 1986

License Fee \$25.00

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38816

LICENSE NO.  
64567

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 2nd day of November 19 86

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                               |            |                |                 |                 |
|------------------------------|-------------------------------|------------|----------------|-----------------|-----------------|
| Groom's Name                 | <b>Adam Warren Osborn</b>     | Age        | <b>21</b>      | Birthplace      | <b>Maryland</b> |
| Groom's Residence            | <b>Glen Burnie, A.A. Co.,</b> | <b>Md.</b> | Marital Status | <b>Single</b>   |                 |
| Bride's Name                 | <b>Lindsey Ann Schwartz</b>   | Age        | <b>22</b>      | Birthplace      | <b>Maryland</b> |
| Bride's Residence            | <b>Glen Burnie, A.A. Co.,</b> | <b>Md.</b> | Marital Status | <b>Divorced</b> |                 |
| Relationship to groom if any | <b>none</b>                   |            |                |                 |                 |

Dr. W. Kenneth Lyons, Jr.

Name of Officiating Clergy or Authorized Officer

Elder United Methodist

Title and Religious Denomination or Office

Millersville, Maryland 21108

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 5, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38817

LICENSE NO.  
 64668

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 21st day of November 19 86k

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**SCOTT JOHN DAVIS**

Age 24

Birthplace **ILLINOIS**  
(State)

Groom's

Residence **ANNAPOLIS, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Bride's

Name **KATHERINE WARNER EDWARDS**

Age 26 Birthplace **WASH.D.C.**  
(State)

Bride's

Residence **ANNAPOLIS, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**Dr. W. Kenneth Lyons, Jr.**

Name of Officiating Clergy or Authorized Officer

License Date **JUNE 19, 86**

**Elder United Methodist**

Title and Religious Denomination or Office

**Millersville, Maryland 21108**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 28, 1986**

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38818

## State of Maryland

LICENSE NO.

64828

Copy for State Department of Health and Mental Hygiene

### ANNE ARUNDEL COUNTY (02)

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**Craig Paul Bass**

Age **29**

Birthplace **Alaska**  
(State)

Groom's  
Residence

**Germantown, Mont. Co.,**

**Md.**

Marital Status **Single**

Bride's  
Name

**Doreen Ann Duffy**

Age **25**

Birthplace **New York**  
(State)

Bride's  
Residence

**Annapolis, A.A. Co.,**

**Md.**

Marital Status **Single**

Relationship to groom if any

**none**

**Robert C. Jones**

Name of Officiating Clergy or Authorized Officer

**Roman Catholic Priest**

Title and Religious Denomination or Office

**109 Duke of Gloucester St., Annapolis, Md.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **11/18/86**

License Fee \$ **25.00**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38819

LICENSE NO.  
65022

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                               |          |           |                |                            |
|------------------------------|-------------------------------|----------|-----------|----------------|----------------------------|
| Groom's Name                 | <b>IRVIN CHARLES WISTLING</b> | Age      | <b>38</b> | Birthplace     | <b>MARYLAND</b><br>(State) |
| Groom's Residence            | <b>MILLERSVILLE</b>           | A.A. CO. | <b>MD</b> | Marital Status | <b>DIVORCED</b>            |
| Bride's Name                 | <b>DEANNA RUTH FOES</b>       | Age      | <b>45</b> | Birthplace     | <b>MARYLAND</b><br>(State) |
| Bride's Residence            | <b>MILLERSVILLE</b>           | A.A. CO. | <b>MD</b> | Marital Status | <b>DIVORCED</b>            |
| Relationship to groom if any | <b>NONE</b>                   |          |           |                |                            |

Rev. Elmer L. Zick

Name of Officiating Clergy or Authorized Officer

Pastor Christ Lutheran Church

Title and Religious Denomination or Office

8245 Jumpers Hole Road zmillersville, MD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

License Date **JULY 16**

**86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38820

LICENSE NO.  
 65062

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Odenton, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**Scott Andrew Paris**

Age

**25**

Birthplace:

**Maryland**

Groom's  
 Residence

**Baltimore,**

**Md.**

Marital Status

**Single**

Bride's  
 Name

**Joan Karen Schreier**

Age

**23**

Birthplace

**Maryland**

Bride's  
 Residence

**Baltimore Co.,**

**Md.**

Marital Status

**Single**

Relationship to groom if any

**none**

**Alvin Donald**

Name of Officiating Clergy or Authorized Officer

License Date **July 17**

**86**

**Cantor Temple Enanuel Jewis**

Title and Religious Denomination or Office

**6605 Park Heights Ave**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 18,** **1986**

**E. AUBREY COLLISON, CLERK**

License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38821

LICENSE NO.  
 65099

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 1986

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)  
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**Emre Teoman**

Age **23** Birthplace **Turkey**

Groom's  
 Residence

**Crofton, A.A. Co.,**

**Md.**

Marital Status **Single**

Bride's  
 Name

**Patricia Lynne Crosby**

Age **23** Birthplace **Wash., D.C.**

Bride's  
 Residence

**Crofton, A.A. Co.,**

**Md.**

Marital Status **Single**

Relationship to groom if any

**none**

**Donald M. Brower**

Name of Officiating Clergy or Authorized Officer

License Date **July 21** **86**

**Clergy Presbyterian Church**

Title and Religious Denomination or Office

**1657 Crofton Pkwy, Crofton, MD 21114**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 10, 1986**

License Fee \$ **25.00**

**E. AUBREY COLLISON, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38822

LICENSE NO.  
65175

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Arnold, Marland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |                 |            |                              |
|------------------------------|-------------------------------------|----------------|-----------------|------------|------------------------------|
| Groom's Name                 | <b>PETER DUNCAN MOOCK</b>           | Age            | <b>39</b>       | Birthplace | <b>CALIFORNIA</b><br>(State) |
| Groom's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                              |
| Bride's Name                 | <b>LAURA ELIZABETH CARLAN</b>       | Age            | <b>29</b>       | Birthplace | <b>KANSAS</b><br>(State)     |
| Bride's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>   |            |                              |
| Relationship to groom if any | <b>NONE</b>                         |                |                 |            |                              |

G. David Yeager

Name of Officiating Clergy or Authorized Officer

License Date **JULY 24,** 86

Pastor, College Parkway Baptist Church

Title and Religious Denomination or Office

301 College Pkw. Arnold, MD 21012

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

E. AUBREY COLLISON, CLERK

License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38823

LICENSE NO.  
65339

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 29th day of November 19 86

the following persons were by me united in marriage at Linthicum, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                         |                |               |            |                            |
|------------------------------|-----------------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name                 | <b>Michael Kenneth Eble</b>             | Age            | <b>24</b>     | Birthplace | <b>Maryland</b><br>(State) |
| Groom's Residence            | <b>Hanover, A.A. Co., Maryland</b>      | Marital Status | <b>Single</b> |            |                            |
| Bride's Name                 | <b>Tara Ann Pupshis</b>                 | Age            | <b>19</b>     | Birthplace | <b>New York</b><br>(State) |
| Bride's Residence            | <b>Millersville, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                            |
| Relationship to groom if any | <b>None</b>                             |                |               |            |                            |

**Francis X. Zorbach**

Name of Officiating Clergy or Authorized Officer

**St. Philip Neri Pastor**

Title and Religious Denomination or Office

**6405 Orchard Rd., Linthicum, Maryland**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **December 1, 1986**

**H. ERLE SCHAFER, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

License Date **Aug, 4th 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38824

LICENSE NO.  
 65661

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                |                |               |            |                                           |
|------------------------------|--------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>SAMUEL GLORIOSO</b>         | Age            | <b>22</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>BALTIMORE BALT. CO. MD</b>  | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>KATHLEEN ELAINE FORDHAM</b> | Age            | <b>23</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>LANNEL A.A. CO. MD</b>      | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                    |                |               |            |                                           |

John N. Parrish

Name of Officiating Clergy or Authorized Officer

Deacon Roman Catholic

Title and Religious Denomination or Office

Resurrection of Our Lord Parish, Laurel, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 26, 1986

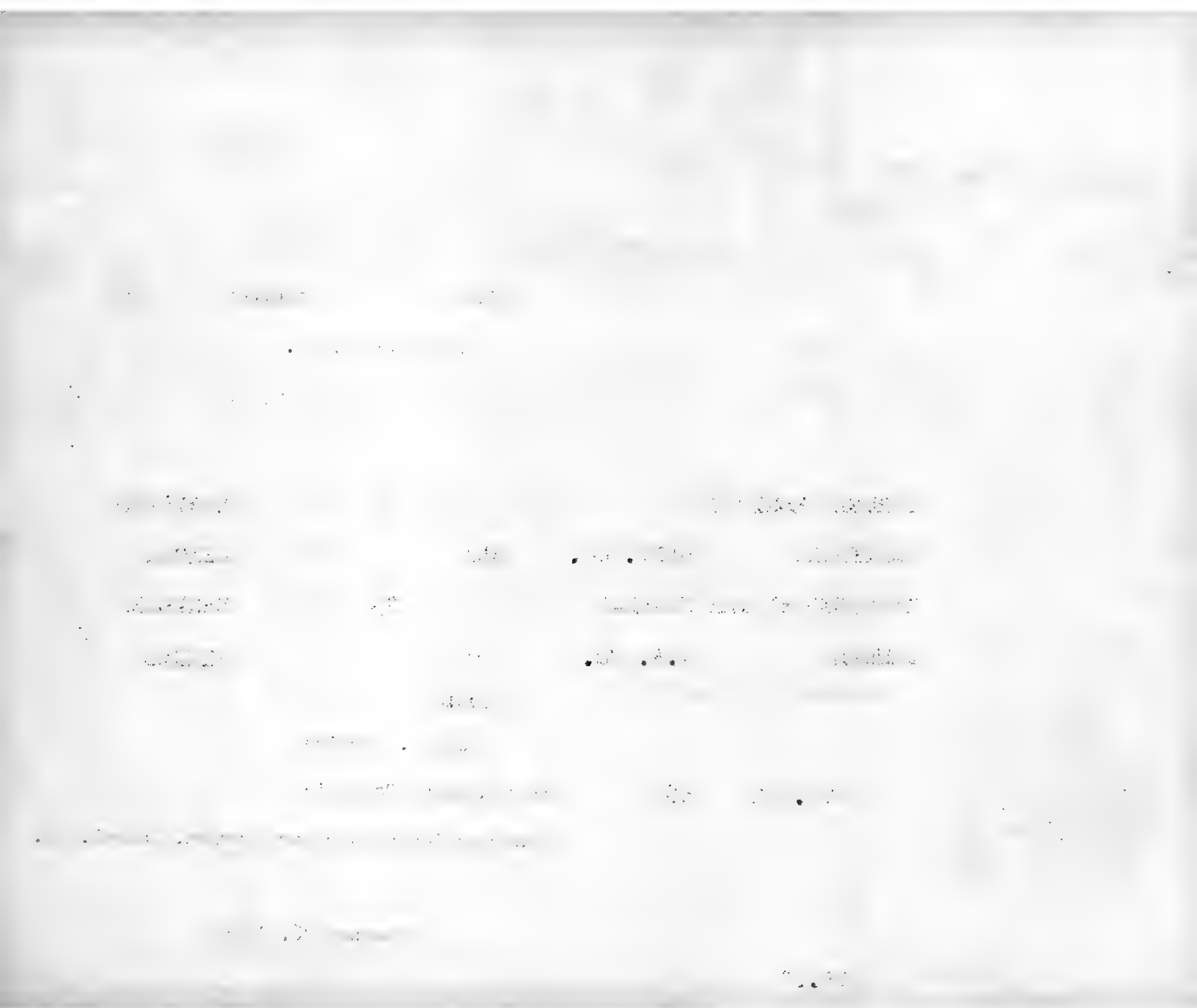
E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

License Date **AUG. 22 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38825

LICENSE NO.  
 65756

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Arnold, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**Ronald Lee Barrier**

Age **35**

Birthplace

**D.C.  
 Washington**  
(State)

Groom's  
 Residence

**Pasadena, A.A. Co., Maryland**

Marital Status

**Divorced**

Bride's  
 Name

**Sheila Mae Nicely**

Age **30**

Birthplace

**Maryland**  
(State)

Bride's  
 Residence

**Pasadena, A.A. Co., Maryland**

Marital Status

**Widow**

Relationship to groom if any

**None**

**Roger W. Fry**

Name of Officiating Clergy or Authorized Officer

**Preacher Church of Christ**

Title and Religious Denomination or Office

**1595 Rithice Hwy. Arnold MD 21012**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **Novmeber, 12, 1986**

**AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee **\$25.00**

License Date **Aug. 27th** 86

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38826

LICENSE NO.  
 65867

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 2nd day of November 19 86

the following persons were by me united in marriage at Severna Park, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                |                |                 |            |                                           |
|------------------------------|--------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>RICARDO ANTONIO KATZ</b>    | Age            | <b>29</b>       | Birthplace | <b>ILLINOIS</b>                           |
| Groom's Residence            | <b>GLEN BURNIE A.A. CO. MD</b> | Marital Status | <b>SINGLE</b>   |            |                                           |
| Bride's Name                 | <b>CAROLYN VICK</b>            | Age            | <b>30</b>       | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>GLEN BURNIE A.A. CO. MD</b> | Marital Status | <b>DIVORCED</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                    |                |                 |            |                                           |

**Daniel W. Wckman, Jr.**

Name of Officiating Clergy or Authorized Officer

**Priest Episcopal Church**

Title and Religious Denomination or Office

**358 Hawick Ct. Severna Park, MD 21146**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 5, 1986**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

License Date **SEPT. 4 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

1. *Journal of the American Medical Association*, 1977; 237: 1000-1001.  
 2. *Journal of the American Medical Association*, 1977; 237: 1001-1002.

[illegible]

| Number of hauls | <i>P. setiferus</i> (%) | <i>P. setiferus</i> + <i>P. setiferus</i> + <i>P. setiferus</i> (%) |
|-----------------|-------------------------|---------------------------------------------------------------------|
| 1               | 10                      | 5                                                                   |
| 2               | 30                      | 10                                                                  |
| 3               | 50                      | 15                                                                  |
| 4               | 70                      | 18                                                                  |
| 5               | 85                      | 20                                                                  |
| 6               | 95                      | 22                                                                  |
| 7               | 100                     | 23                                                                  |
| 8               | 100                     | 24                                                                  |
| 9               | 100                     | 25                                                                  |
| 10              | 100                     | 26                                                                  |

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1. *Chrysomelids* 2. *Curculionids* 3. *Chrysomelids* 4. *Chrysomelids* 5. *Chrysomelids* 6. *Chrysomelids* 7. *Chrysomelids* 8. *Chrysomelids* 9. *Chrysomelids* 10. *Chrysomelids* 11. *Chrysomelids* 12. *Chrysomelids* 13. *Chrysomelids* 14. *Chrysomelids* 15. *Chrysomelids* 16. *Chrysomelids* 17. *Chrysomelids* 18. *Chrysomelids* 19. *Chrysomelids* 20. *Chrysomelids* 21. *Chrysomelids* 22. *Chrysomelids* 23. *Chrysomelids* 24. *Chrysomelids* 25. *Chrysomelids* 26. *Chrysomelids* 27. *Chrysomelids* 28. *Chrysomelids* 29. *Chrysomelids* 30. *Chrysomelids* 31. *Chrysomelids* 32. *Chrysomelids* 33. *Chrysomelids* 34. *Chrysomelids* 35. *Chrysomelids* 36. *Chrysomelids* 37. *Chrysomelids* 38. *Chrysomelids* 39. *Chrysomelids* 40. *Chrysomelids* 41. *Chrysomelids* 42. *Chrysomelids* 43. *Chrysomelids* 44. *Chrysomelids* 45. *Chrysomelids* 46. *Chrysomelids* 47. *Chrysomelids* 48. *Chrysomelids* 49. *Chrysomelids* 50. *Chrysomelids* 51. *Chrysomelids* 52. *Chrysomelids* 53. *Chrysomelids* 54. *Chrysomelids* 55. *Chrysomelids* 56. *Chrysomelids* 57. *Chrysomelids* 58. *Chrysomelids* 59. *Chrysomelids* 60. *Chrysomelids* 61. *Chrysomelids* 62. *Chrysomelids* 63. *Chrysomelids* 64. *Chrysomelids* 65. *Chrysomelids* 66. *Chrysomelids* 67. *Chrysomelids* 68. *Chrysomelids* 69. *Chrysomelids* 70. *Chrysomelids* 71. *Chrysomelids* 72. *Chrysomelids* 73. *Chrysomelids* 74. *Chrysomelids* 75. *Chrysomelids* 76. *Chrysomelids* 77. *Chrysomelids* 78. *Chrysomelids* 79. *Chrysomelids* 80. *Chrysomelids* 81. *Chrysomelids* 82. *Chrysomelids* 83. *Chrysomelids* 84. *Chrysomelids* 85. *Chrysomelids* 86. *Chrysomelids* 87. *Chrysomelids* 88. *Chrysomelids* 89. *Chrysomelids* 90. *Chrysomelids* 91. *Chrysomelids* 92. *Chrysomelids* 93. *Chrysomelids* 94. *Chrysomelids* 95. *Chrysomelids* 96. *Chrysomelids* 97. *Chrysomelids* 98. *Chrysomelids* 99. *Chrysomelids* 100. *Chrysomelids*

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1971).

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2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 2681, 26

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| Trial | Control | MCI | AD |
|-------|---------|-----|----|
| 1     | 85      | 75  | 65 |
| 2     | 88      | 78  | 68 |
| 3     | 90      | 80  | 70 |
| 4     | 92      | 82  | 72 |
| 5     | 95      | 85  | 75 |

1992

16-1 000979

2

## Certificate of Marriage

86-38827

State of Maryland

LICENSE NO.

65882

Copy for State Department of Health and Mental Hygiene

ANNE ARUNDEL COUNTY (02)

I Hereby Certify that on the 22nd day of November 19 86the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

Jeffrey Brian Zimmerman

Age 27

Birthplace

Maryland  
(State)Groom's  
Residence

Pasadena, A.A. Co., Maryland

Marital Status

Single

Bride's  
Name

Anna Mae Wilson

Age 26

Birthplace

Maryland  
(State)Bride's  
Residence

Pasadena, A.A. Co., Maryland

Marital Status

Single

Relationship to groom if any

None

Charles E. Harvey

Name of Officiating Clergy or Authorized Officer

License Date Sept. 5th 86

Pastor, Community United Methodist Church

Title and Religious Denomination or Office

238 Hrlem Rd., Riviera Beach, MD 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on December 2, 1986

H. ERLE SCHAFFER, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

1947

1948

1949

1950

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1959

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2

*Certificate of Marriage*  
*State of Maryland*

86-38828

LICENSE NO.  
 65923

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 29th day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**John Elwood Jones, Jr.**

Age **28** Birthplace **Maryland**

Groom's

Residence

**Severn, A.A. Co., Maryland**

Marital Status **Single**

Bride's

Name

**Christy Jean Pitts**

Age **30** Birthplace **Maryland**

Bride's

Residence

**Annapolis, A.A. Co., Maryland**

Marital Status **Single**

Relationship to groom if any

**None**

**R. Sydney Abernethy, Jr.**

Name of Officiating Clergy or Authorized Officer

**Pastor, Mt. Lia. United Methodist Church**

Title and Religious Denomination or Office

**612 Second Street Annapolis, MD**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **December 2, 1986**

**H. ERLE SCHAFFER, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

License Date **Sept. 8th 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

1. The first part of the report  
describes the general situation  
of the country.

2. The second part of the report  
describes the situation in the  
different regions of the country.  
3. The third part of the report  
describes the situation in the  
different sectors of the economy.

4. The fourth part of the report  
describes the situation in the  
different sectors of the economy.  
5. The fifth part of the report  
describes the situation in the  
different sectors of the economy.

6. The sixth part of the report

describes the situation



2

*Certificate of Marriage*  
*State of Maryland*

86-38829

LICENSE NO.  
66037

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |               |            |                   |
|------------------------------|----------------------------------------|----------------|---------------|------------|-------------------|
| Groom's Name                 | <b>CHRISTOPHER THOMAS HELMRATH</b>     | Age            | <b>23</b>     | Birthplace | <b>MISSOURI</b>   |
| Groom's Residence            | <b>ARNOLD, A.A.CO., MARYLAND</b>       | Marital Status | <b>SINGLE</b> |            |                   |
| Bride's Name                 | <b>SUSAN ELIZABETH TICE</b>            | Age            | <b>23</b>     | Birthplace | <b>NEW JERSEY</b> |
| Bride's Residence            | <b>MILLERSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                   |
| Relationship to groom if any | <b>NONE</b>                            |                |               |            |                   |

**Dr. W. Kenneth Lyons, Jr.**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 15 86**

**Elder United Methodist**

Title and Religious Denomination or Office

**Millersville, Maryland 21108**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on **November 26, 1986**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38830

LICENSE NO.  
 66059

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 27th day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |                 |            |                                           |
|------------------------------|-------------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>William Leon Hardy</b>           | Age            | <b>32</b>       | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Groom's Residence            | <b>Baltimore City, Maryland</b>     | Marital Status | <b>Divorced</b> |            |                                           |
| Bride's Name                 | <b>Gloria Kay Williams</b>          | Age            | <b>31</b>       | Birthplace | <b>Virginia</b><br><small>(State)</small> |
| Bride's Residence            | <b>Pasadena, A.A. Co., Maryland</b> | Marital Status | <b>Divorced</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                         |                |                 |            |                                           |

**Dan Stottlemeyer**

Name of Officiating Clergy or Authorized Officer

License Date **Sept. 15** **86** **Ordained Gospel Churches & Minister Inter.**  
Title and Religious Denomination or Office

**P.O. Box 1293 Keyser, Vrginia 26726**  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **December 1, 1986**

**H. ERLE SCHAFER, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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1. *Phragmites australis* (Cav.) Trin. ex Steud.

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1. *Chlorophyll a* (Chl *a*) and *Chlorophyll b* (Chl *b*) were determined using a spectrophotometer (Shimadzu UV-1601) at 663 nm and 646 nm, respectively. The concentrations of Chl *a* and Chl *b* were calculated using the following equations: Chl *a* (mg g<sup>-1</sup>) = 12.7 (OD<sub>663</sub> - 2.29 OD<sub>646</sub>), Chl *b* (mg g<sup>-1</sup>) = 22.9 (OD<sub>646</sub> - 0.21 OD<sub>663</sub>).

[illegible]

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 84

*Journal of Management Education* 30(6)

2

*Certificate of Marriage*  
*State of Maryland*

86-38831

LICENSE NO.  
 66100

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Linthicum, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                          |                |                                                      |
|------------------------------|------------------------------------------|----------------|------------------------------------------------------|
| Groom's Name                 | <b>RICHARD ALEX PORTER</b>               | Age <b>24</b>  | Birthplace <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>ELLICOTT CITY, HOW. CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                        |
| Bride's Name                 | <b>KIMBERLY ANN KING</b>                 | Age <b>27</b>  | Birthplace <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>BALTIMORE, BALTO. CO., MARYLAND</b>   | Marital Status | <b>SINGLE</b>                                        |
| Relationship to groom if any | <b>NONE</b>                              |                |                                                      |

William F. R. Gilroy

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 17, 86**

Pastor, St. John Lutheran Church

Title and Religious Denomination or Office

300 W. Maple Road, Linthicum, MD 21090

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 19, 1986

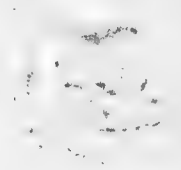
License Fee \$ 25.00

R. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

1. The first part of the report is devoted to a general survey of the situation in the country. It is followed by a detailed analysis of the economic situation, which shows a steady decline in the standard of living of the population. The third part of the report deals with the social and cultural life of the country, and the fourth part with the political situation. The report concludes with a series of recommendations for the improvement of the country's situation.



2

*Certificate of Marriage*  
*State of Maryland*

86-38832

LICENSE NO.  
 66154

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                         |                |               |            |                                           |
|------------------------------|-----------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>Ronald Lee Anderson</b>              | Age            | <b>28</b>     | Birthplace | <b>Colorado</b><br><small>(State)</small> |
| Groom's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b>  | Marital Status | <b>Single</b> |            |                                           |
| Bride's Name                 | <b>Katharine Lucy Kumm</b>              | Age            | <b>23</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Bride's Residence            | <b>Severna Park, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                             |                |               |            |                                           |

**Richzrd L. Grammer**

Name of Officiating Clergy or Authorized Officer

License Date **Sept. 19 86**

**Pastor Granite Baptist Church**

Title and Religious Denomination or Office

**7823 Oakwood Rd., Glen Burnie, Maryland 2061**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 26m 1986**  
**E. AUBREY COLLISON, CLERK**

License Fee **\$25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

State of Maryland

86-38833

LICENSE NO.

66168

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 18<sup>th</sup> day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **ERIC ALEX AMSTER**Age **32** Birthplace **NEW JERSEY**  
(State)

Groom's

Residence **COLUMBIA, HOWARD CO., MARYLAND**Marital Status **SINGLE**

Bride's

Name **GAIL WHITED HERRERA**Age **35** Birthplace **MARYLAND**  
(State)

Bride's

Residence **BALTIMORE, BALTO.CO., MARYLAND**Marital Status **DIVORCED**

Relationship to groom if any

**NONE**Anthony J. Girandols

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 22, 86**Independent Pastor

Title and Religious Denomination or Office

324 Marlinspike Severna Park, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 26, 1986License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38834

LICENSE NO.  
 66182

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)  
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**RONALD L. MARVEL**

Age **21** Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**PASADENA, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**LISA R. THOMAS**

Age **22** Birthplace **MARYLAND**  
(State)

Bride's  
 Residence

**PASADENA, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**James E. Davis**

Name of Officiating Clergy or Authorized Officer

**Magothy United Methodist Church**

Title and Religious Denomination or Office

**3703 Mountain Rd., Pasadena, MD 21122**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 7, 1986  
**E. AUBREY COLLISON, CLERK**

License Fee \$ 25.00

\$25.00MA

001AACC 9-19-866623

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38835

LICENSE NO.  
66199

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |                 |            |                            |
|------------------------------|---------------------------------------|----------------|-----------------|------------|----------------------------|
| Groom's Name                 | <b>JEROME FRANK SHEPPARD</b>          | Age            | <b>52</b>       | Birthplace | <b>MARYLAND</b><br>(State) |
| Groom's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                            |
| Bride's Name                 | <b>BETTY LOU MICCICHE</b>             | Age            | <b>50</b>       | Birthplace | <b>MARYLAND</b><br>(State) |
| Bride's Residence            | <b>SEVERN, A.A.CO., MARYLAND</b>      | Marital Status | <b>DIVORCED</b> |            |                            |
| Relationship to groom if any | <b>NONE</b>                           |                |                 |            |                            |

**Rev. Howard Thime**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 22 86**

**Pastor, Lutheran Our Redeemer**

Title and Religious Denomination or Office

**7606 Quarterfield Rd., Glen Burnie, 21061**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

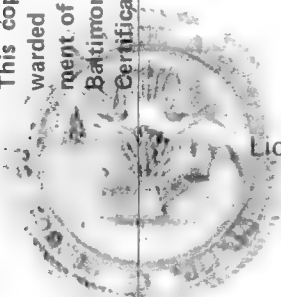
I hereby certify that the above is a true copy of a record filed in this  
office on **November 21, 1986**

License Fee \$ **25.00**

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2001

bioRxiv preprint doi: <https://doi.org/10.1101/000000>; this version posted January 1, 2016. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY-NC-ND 4.0 International license.

Figure 1. The effect of the number of trials on the number of correct responses. The number of correct responses was significantly higher than the number of incorrect responses in all cases. The number of correct responses was significantly higher than the number of incorrect responses in all cases. The number of correct responses was significantly higher than the number of incorrect responses in all cases.

*Journal of Management Inquiry* 16(4) 407-428  
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1

2000

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2

*Certificate of Marriage*  
*State of Maryland*

86-38836

LICENSE NO.  
 66246

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**Donald Earl Kirby**

Age 54 Birthplace Maryland  
(State)

Groom's  
 Residence

**Glen Burnie, A.A. Co., Maryland**

Marital Status **Widower**

Bride's  
 Name

**Mary Catherine Paul**

Age 52 Birthplace Maryland  
(State)

Bride's  
 Residence

**Glen Burnie, A.A. Co., Maryland**

Marital Status **Widow**

Relationship to groom if any

**None**

John L. Kelly

Name of Officiating Clergy or Authorized Officer

Roman Catholic Priest

Title and Religious Denomination or Office

1451 Furnance Ave., Glen Burnie, MD 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 5, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$25.00

License Date Sept. 25

86

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38837

LICENSE NO.  
66255

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Laurel, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                |                |               |            |                 |
|------------------------------|--------------------------------|----------------|---------------|------------|-----------------|
| Groom's Name                 | <b>HARVEY LEE BEGHTOL, JR.</b> | Age            | <b>20</b>     | Birthplace | <b>MARYLAND</b> |
| Groom's Residence            | <b>LAUREL A.A. CO. MD</b>      | Marital Status | <b>SINGLE</b> |            |                 |
| Bride's Name                 | <b>KIRSTEN LEE MAYNARD</b>     | Age            | <b>17</b>     | Birthplace | <b>TEXAS</b>    |
| Bride's Residence            | <b>LAUREL A.A. CO. MD</b>      | Marital Status | <b>SINGLE</b> |            |                 |
| Relationship to groom if any | <b>NONE</b>                    |                |               |            |                 |

Robert E. Rogers

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 25 86**

Minister Free Methodist Church

Title and Religious Denomination or Office

314 Brock Bridge Rd., Laurel

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986  
E. AUBREY COBBISON, CLERK

License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38838

## State of Maryland

LICENSE NO.

66256

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 16th day of Novemner 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

**RODNEY JOHN JAROSZEK, JR.**Age 24

Birthplace

**MARYLAND**  
(State)

Groom's

Residence

**ANNAPOLIS, A.A.CO., MARYLAND**

Marital Status

**DIVORCED**

Bride's

Name

**CHRISTINA MARIE BELL**Age 20

Birthplace

**MARYLAND**  
(State)

Bride's

Residence

**ANNAPOLIS, A.A.CO., MARYLAND**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****C. David Jones**

Name of Officiating Clergy or Authorized Officer

**Doctor of Ministry United Methodist**

Title and Religious Denomination or Office

**Wallace Mannor Td. Annapoli, MD 21404**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

**November 21, 1986**

office on

License Fee \$ 25.00**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38839

LICENSE NO.  
66269

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 27th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                               |
|------------------------------|----------------------------------------|----------------|-----------------|------------|-------------------------------|
| Groom's Name                 | <b>Robert Eugene Rawlings, Sr.</b>     | Age            | <b>41</b>       | Birthplace | <b>Tenn.</b><br>(State)       |
| Groom's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Divorced</b> |            |                               |
| Bride's Name                 | <b>Anna Lucia Witthaus</b>             | Age            | <b>25</b>       | Birthplace | <b>W. Virginia</b><br>(State) |
| Bride's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Single</b>   |            |                               |
| Relationship to groom if any | <b>None</b>                            |                |                 |            |                               |

**Rev. Joel Dan Lehman**

Name of Officiating Clergy or Authorized Officer

License Date **Sept. 26** **86** **Clergy American Evangelical Church**  
Title and Religious Denomination or Office

**3446 Pike Ridge Rd., Edgewater, MD 21037**  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **December 1, 1986**

**H. ERLE SCHAFER, CLERK**

Signature — Clerk of the Court

License Fee \$**25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

10

1. The first part of the report  
describes the general situation

2. The second part of the report  
describes the results of the  
investigation. It is divided into  
three sections: the first section  
describes the results of the  
investigation, the second section  
describes the results of the  
investigation, and the third section  
describes the results of the  
investigation.

3. The third part of the report  
describes the results of the  
investigation.

4. The fourth part of the report  
describes the results of the  
investigation.

5. The fifth part of the report  
describes the results of the  
investigation.

6. The sixth part of the report  
describes the results of the  
investigation.

2

*Certificate of Marriage*  
*State of Maryland*

86-38840

LICENSE NO.  
 66279

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 1986

the following persons were by me united in marriage at Severna Park, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                                             |
|------------------------------|----------------------------------------|----------------|-----------------|------------|---------------------------------------------|
| Groom's Name                 | <b>HARRY P. BAKER, III</b>             | Age            | <b>37</b>       | Birthplace | <b>VIRGINIA</b><br><small>(State)</small>   |
| Groom's Residence            | <b>MILLERSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                                             |
| Bride's Name                 | <b>DIANA LEA CONKLIN</b>               | Age            | <b>38</b>       | Birthplace | <b>WASH. D.C.</b><br><small>(State)</small> |
| Bride's Residence            | <b>MILLERSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>   |            |                                             |
| Relationship to groom if any | <b>NONE</b>                            |                |                 |            |                                             |

**Gerald W. Weiss**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 29, 86**

**Pastor Severna Park United Methodist Church**  
Title and Religious Denomination or Office

**731 Benfield Rd. Severa Park, MD 21146**  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 5, 1986

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38841

LICENSE NO.  
 66308

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 21st day of November 1986

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**CHARLES FITZGERALD PATRICK**

Age **22** Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**PASADENA, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**SANDRA DEE FUHRER**

Age **19** Birthplace **MARYLAND**  
(State)

Bride's  
 Residence

**PASADENA, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

Charles E. Harvey

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 1st 86**

Pastor, Community United Methodist Church

Title and Religious Denomination or Office

238 Harlem Rd., Riviera Beach, MD 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on December 2, 1986

H. ERLE SCHAFER, CLERK

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

ANALYSIS, REVISION

1. The first part of the report is a general introduction to the subject. It discusses the importance of the study and the objectives of the research. The second part is a detailed description of the methods used in the study. This includes a description of the subjects, the materials, and the procedures. The third part is a presentation of the results of the study. This includes a description of the data and the statistical analysis. The fourth part is a discussion of the results and their implications. This includes a comparison of the results with previous studies and a discussion of the limitations of the study. The fifth part is a conclusion and a summary of the findings. This includes a statement of the main results and a recommendation for further research.

REFERENCES

1950

2

*Certificate of Marriage*  
*State of Maryland*

86-38842

LICENSE NO.  
 66332

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 16th day of November 19 86

the following persons were by me united in marriage at Odenton, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                      |                |                 |            |                                           |
|------------------------------|--------------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>Richard J. Lermen</b>             | Age            | <b>31</b>       | Birthplace | <b>Japan</b><br><small>(State)</small>    |
| Groom's Residence            | <b>Gambrills, A.A. Co., Maryland</b> | Marital Status | <b>Single</b>   |            |                                           |
| Bride's Name                 | <b>Theresa L. Fleming</b>            | Age            | <b>30</b>       | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Bride's Residence            | <b>Gambrills, A.A. Co., Maryland</b> | Marital Status | <b>Divorced</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                          |                |                 |            |                                           |

Father Frank Freel

Name of Officiating Clergy or Authorized Officer

Pastor R. Catholic

Title and Religious Denomination or Office

1283 Odenton Rd. Odenton, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 19, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38843

LICENSE NO.

66334

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

**James F. Gallagher, III**

Age

**29**

Birthplace

**Maryland**  
(State)

Groom's

Residence

**Annapolis, A.A. Co., Maryland**

Marital Status

**Single**

Bride's

Name

**Leslie C. Grimes**

Age

**24**

Birthplace

**Maryland**  
(State)

Bride's

Residence

**Annapolis, A.A. Co., Maryland**

Marital Status

**Single**

Relationship to groom if any

**None**Ray E. BlansetName of Officiating Clergy or Authorized OfficerLicense Date **Oct. 2****86**Pastor, St. Martin's Lutheran ChurchTitle and Religious Denomination or Office1120 Spa Rd., Annapolis, Maryland 21403Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 13, 1986

License Fee \$25.00E. AUBREY COLLISON, CLERKSignature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38844

LICENSE NO.

66339

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Ft. Meade, a Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                             |                 |             |                |                            |
|------------------------------|-----------------------------|-----------------|-------------|----------------|----------------------------|
| Groom's Name                 | <b>GREGORY ALLEN WILSON</b> | Age             | <b>23</b>   | Birthplace     | <b>MICHIGAN</b><br>(State) |
| Groom's Residence            | <b>FT. MEADE</b>            | <b>A.A. CO.</b> | <b>MD</b>   | Marital Status | <b>DIVORCED</b>            |
| Bride's Name                 | <b>KIM SCHERENESE TERRY</b> | Age             | <b>21</b>   | Birthplace     | <b>MICHIGAN</b><br>(State) |
| Bride's Residence            | <b>SEVERN</b>               | <b>A.A. CO.</b> | <b>MD</b>   | Marital Status | <b>SINGLE</b>              |
| Relationship to groom if any |                             |                 | <b>NONE</b> |                |                            |

John G. Hickman

Name of Officiating Clergy or Authorized Officer

Chaplain USA American Baptist Churches

Title and Religious Denomination or Office

519th Military Police Battalion, Ft. Meade

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

20755

I hereby certify that the above is a true copy of a record filed in this  
office on November 14, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38845

LICENSE NO.  
 66347

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Hanover, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |               |            |                                           |
|------------------------------|---------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>DAVID ALLEN PEMBERTON</b>          | Age            | <b>28</b>     | Birthplace | <b>MISSOURI</b><br><small>(State)</small> |
| Groom's Residence            | <b>HANOVER, A.A.CO., MARYLAND</b>     | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>KELLY LYNN WRIGHT</b>              | Age            | <b>18</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                           |                |               |            |                                           |

James R. Wikkinson

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 2nd** **86**

Pastor Assemblies of God

Title and Religious Denomination or Office

P.O. Box 136 Hanover, Maryland 21076

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 14, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38846

LICENSE NO.  
 66375

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Linthicum, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |               |            |                                           |
|------------------------------|---------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>DONALD RAY BURNS</b>               | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>LANSDOWNE, BALTO CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>ANGELA RAE GARRETT</b>             | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>LANSDOWNE, BALTO.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                           |                |               |            |                                           |

**Rev. Paul Joseph Elam**

Name of Officiating Clergy or Authorized Officer

**Ordained Minister Church of the Brethren**

Title and Religious Denomination or Office

**205 Regency Cir. Linthicum, MD 21090**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 6, 1986**

**F. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

License Date **OCT. 6th** **86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38847

LICENSE NO.  
66385

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                               |                |               |            |                              |
|------------------------------|-------------------------------|----------------|---------------|------------|------------------------------|
| Groom's Name                 | <b>MICHAEL KEITH LANNON</b>   | Age            | <b>22</b>     | Birthplace | <b>MARYLAND</b><br>(State)   |
| Groom's Residence            | <b>ANNAPOLIS, A.A. CO. MD</b> | Marital Status | <b>SINGLE</b> |            |                              |
| Bride's Name                 | <b>THERESA ANN BRANCH</b>     | Age            | <b>20</b>     | Birthplace | <b>WASH. D.C.</b><br>(State) |
| Bride's Residence            | <b>ANNAPOLIS A.A. CO. MD</b>  | Marital Status | <b>SINGLE</b> |            |                              |
| Relationship to groom if any | <b>NONE</b>                   |                |               |            |                              |

Rev. C. David Jones

Name of Officiating Clergy or Authorized Officer

Doctor of Ministry United Methodist Church

Title and Religious Denomination or Office

St. Andrews United Methodist Church

Address of Clergy or Authorized Officer Annapolis, MD

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 5, 1986

E. AUBREY COLLISON, CLERK

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

License Date **OCTT 6** 86

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38848

LICENSE NO.  
66399

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Laurel, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |               |            |                           |
|------------------------------|---------------------------------------|----------------|---------------|------------|---------------------------|
| Groom's Name                 | <b>LIONEL HENRY HOWLAND</b>           | Age            | <b>42</b>     | Birthplace | <b>GEORGIA</b><br>(State) |
| Groom's Residence            | <b>STEVENSVILLE, Q.A., MARYLAND</b>   | Marital Status | <b>SINGLE</b> |            |                           |
| Bride's Name                 | <b>MAUREEN ANN MC LAUGHLIN</b>        | Age            | <b>35</b>     | Birthplace | <b>GERMANY</b><br>(State) |
| Bride's Residence            | <b>CROWNSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                           |
| Relationship to groom if any | <b>NONE</b>                           |                |               |            |                           |

Rev. Joseph F. Kitko

Name of Officiating Clergy or Authorized Officer

Pastor Resurrection Catholic

Title and Religious Denomination or Office

8402 Brock Bridge Rd. 20707

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

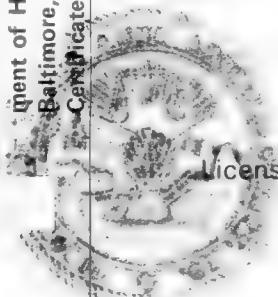
I hereby certify that the above is a true copy of a record filed in this

office on November 12, 1986  
E. AUBREY COLLISON, CLERK  
E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.







2

*Certificate of Marriage*  
*State of Maryland*

86-38849

LICENSE NO.  
 66414

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 1986

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                                                         |
|------------------------------|----------------------------------------|----------------|---------------------------------------------------------|
| Groom's Name                 | <b>FREDERICK ROBERTS BROWNE</b>        | Age <b>32</b>  | Birthplace <b>N. CAROLINA</b><br><small>(State)</small> |
| Groom's Residence            | <b>MILLERSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                           |
| Bride's Name                 | <b>BARBARA ANN EAZOR</b>               | Age <b>39</b>  | Birthplace <b>NEW MEXICO</b><br><small>(State)</small>  |
| Bride's Residence            | <b>CROFTON, A.A.CO., MARYLAND</b>      | Marital Status | <b>DIVORCED</b>                                         |
| Relationship to groom if any | <b>NONE</b>                            |                |                                                         |

Dr. W. Kenneth Lyons, Jr.

Name of Officiating Clergy or Authorized Officer

Elder United Methodist

Title and Religious Denomination or Office

Millersville, Maryland 21108

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 14, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

License Date **OCT. 8th, 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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*Certificate of Marriage*  
*State of Maryland*

86-38850

LICENSE NO.

66419

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |                                                      |
|------------------------------|---------------------------------------|----------------|------------------------------------------------------|
| Groom's Name                 | <b>DONALD EUGENE SCOTT</b>            | Age <b>26</b>  | Birthplace <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b>                                      |
| Bride's Name                 | <b>HEIDI LYNN BROWN</b>               | Age <b>23</b>  | Birthplace <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                        |
| Relationship to groom if any | <b>NONE</b>                           |                |                                                      |

**Bernard E. Fogle**Name of Officiating Clergy or Authorized OfficerLicense Date **OCT. 8th 86****Minister Messiah United Methodist Church**Title and Religious Denomination or Office**20 Thomas Road, Glen Burnie, Maryland 21061**Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **December 1, 1986**License Fee \$ **25.00****H. ERLE SCHAFFER, CLERK**Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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| 1943 | 1944 | 1945 |
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*Certificate of Marriage*  
*State of Maryland*

86-38851

LICENSE NO.  
 66423

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |               |            |                                           |
|------------------------------|----------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>MICHAEL EDWARD HASKE, JR.</b>       | Age            | <b>28</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b>    | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>REGINA MARIE DICK</b>               | Age            | <b>29</b>     | Birthplace | <b>NEW YORK</b><br><small>(State)</small> |
| Bride's Residence            | <b>SEVERNA PARK, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                            |                |               |            |                                           |

Fr. Killian Moone

Name of Officiating Clergy or Authorized Officer

Roman Catholic Priest

Title and Religious Denomination or Office

515 W. Broad St. Eufaula, Alabama

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 10, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

License Date **OCT. 8th** **86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38852

LICENSE NO.  
 66429

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                    |                |               |            |                                             |
|------------------------------|------------------------------------|----------------|---------------|------------|---------------------------------------------|
| Groom's Name                 | <b>ALAN MICHAEL GABLE</b>          | Age            | <b>23</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small>   |
| Groom's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                             |
| Bride's Name                 | <b>KARIN DENISE KALKMAN</b>        | Age            | <b>20</b>     | Birthplace | <b>WASH, D.C.</b><br><small>(State)</small> |
| Bride's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                             |
| Relationship to groom if any | <b>NONE</b>                        |                |               |            |                                             |

**Vincent J. Pericone**

Name of Officiating Clergy or Authorized Officer

**Deacon R. Catholic**

Title and Religious Denomination or Office

**9120 Covereo R. Balt, MD 21234**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Maryland Nov. 28, 1986

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38853

LICENSE NO.

66439

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 1986

the following persons were by me united in marriage at Linthicum, Mrylnd  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

**MICHAEL ROBERT WANGEMANN**Age **30**

Birthplace

**WISCONSIN**  
(State)

Groom's

Residence

**BALTIMORE****BALT. CO.****MD**

Marital Status

**SINGLE**

Bride's

Name

**MARY ANN PATER**Age **26**

Birthplace

**MARYLAND**  
(State)

Bride's

Residence

**LINTHICUM****A.A. CO.****MD**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****Francis X. Zorbach**

Name of Officiating Clergy or Authorized Officer

**Pastor, St. Philip Church**

Title and Religious Denomination or Office

**6405 Orchard Rd Linthicum, Maryland**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 26, 1986****E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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*Certificate of Marriage*  
*State of Maryland*

86-38854

LICENSE NO.  
 66443

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Annapolis  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |                 |            |                                           |
|------------------------------|-------------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>STEPHEN AUGUST WOJCIECHOWSKI</b> | Age            | <b>44</b>       | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>PASADENA A.A. CO. MD</b>         | Marital Status | <b>DIVORCED</b> |            |                                           |
| Bride's Name                 | <b>CHARLOTTE JEAN GOSS</b>          | Age            | <b>46</b>       | Birthplace | <b>PENN.</b><br><small>(State)</small>    |
| Bride's Residence            | <b>PASADENA A.A. CO. MD</b>         | Marital Status | <b>DIVORCED</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                         |                |                 |            |                                           |

Donald R. Matney

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 8 86**

Minister Unitd Methodist

Title and Religious Denomination or Office

855 Chestnut Trade Dr. Annapolis MD

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on Novmeber 13, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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2

*Certificate of Marriage*  
*State of Maryland*

86-38855

LICENSE NO.  
 66453

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                         |                |               |            |                                           |
|------------------------------|-----------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>Frederick Paul Rex</b>               | Age            | <b>23</b>     | Birthplace | <b>Ohio</b><br><small>(State)</small>     |
| Groom's Residence            | <b>Severna Park, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Bride's Name                 | <b>Pamela Jean Rickloff</b>             | Age            | <b>25</b>     | Birthplace | <b>New York</b><br><small>(State)</small> |
| Bride's Residence            | <b>Severna Park, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                             |                |               |            |                                           |

Francis J. Linn

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 9th** **86**

Catholic Priest Our lady of the Fields

Title and Religious Denomination or Office

1069 Cecil Ave., Millersville, Md.

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on 11/5/86

License Fee **\$25.00**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38856

LICENSE NO.  
 66456

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**Jude Brandes**

Age **23** Birthplace **Pennsylvania**  
(State)

Groom's  
 Residence

**Frederick, Frederick Co., Maryland**

Marital Status **Single**

Bride's  
 Name

**Julie L. Harding**

Age **23** Birthplace **Maryland**  
(State)

Bride's  
 Residence

**Frederick, Frederick Co., Maryland**

Marital Status **Single**

Relationship to groom if any

**None**

Rev. Elmer L. Zick

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 9th** **86**

Pastor Christ Luth. Church

Title and Religious Denomination or Office

8245 Jumpers Hole Rd.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on Novmeber 12, 1986

License Fee \$25.00

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38857

LICENSE NO.  
 66458

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Linthicum, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**RONALD DENNIS DUDLEY**

Age **28**

Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**FERNDAL, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**CHARLENE MARIE RINGGOLD**

Age **34**

Birthplace **MARYLAND**  
(State)

Bride's  
 Residence

**FERNDAL, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

Reg. D. Barss

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 9th** **86**

Minister. Linthicum Heights United Meth

Title and Religious Denomination or Office

Church Linthicum Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 19, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38858

LICENSE NO.  
 66461

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 9th day of November 19 86

the following persons were by me united in marriage at Arnold, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                      |                |               |            |                                           |
|------------------------------|--------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>David Alan Youngren</b>           | Age            | <b>20</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Groom's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Bride's Name                 | <b>Christina Lynn Cleveland</b>      | Age            | <b>18</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Bride's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                          |                |               |            |                                           |

Rev. Thomas P. Williamson

Name of Officiating Clergy or Authorized Officer

Pastor Lutheran

Title and Religious Denomination or Office

461 College Parkway Arnold, Maryland 21012

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 12, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$25.00

License Date Oct. 10 86

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38859

LICENSE NO.  
 66467

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8<sup>th</sup> day of November 19 86

the following persons were by me united in marriage at millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                                           |
|------------------------------|----------------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>MICHAEL J. PATTERSON</b>            | Age            | <b>28</b>       | Birthplace | <b>MICHIGAN</b><br><small>(State)</small> |
| Groom's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b>  | Marital Status | <b>SINGLE</b>   |            |                                           |
| Bride's Name                 | <b>ROSEMARY E. SPANGENBERG</b>         | Age            | <b>27</b>       | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>BALTIMORE, HOWARD CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                            |                |                 |            |                                           |

Dr. W. Kenneth Lyons, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10, 86**

Elder United Methodsit

Title and Religious Denomination or Office

Millersville, Maryland 21008

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 14, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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*Certificate of Marriage*  
*State of Maryland*

86-38860

LICENSE NO.  
 66479

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 1986

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |               |            |                                             |
|------------------------------|-------------------------------------|----------------|---------------|------------|---------------------------------------------|
| Groom's Name                 | <b>GORDON PAUL JAYNE</b>            | Age            | <b>26</b>     | Birthplace | <b>CALIFORNIA</b><br><small>(State)</small> |
| Groom's Residence            | <b>GREENBELT, P.G.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                             |
| Bride's Name                 | <b>BRENDA LYNNE OWEN</b>            | Age            | <b>25</b>     | Birthplace | <b>VIRGINIA</b><br><small>(State)</small>   |
| Bride's Residence            | <b>GREENBELT, P.G.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                             |
| Relationship to groom if any | <b>NONE</b>                         |                |               |            |                                             |

**Robert Burk Hill, Jr.**

Name of Officiating Clergy or Authorized Officer

**Cahpalin U.S. Army Lutheran**

Title and Religious Denomination or Office

**19525 Olney Mill Rd., Olney, Md.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

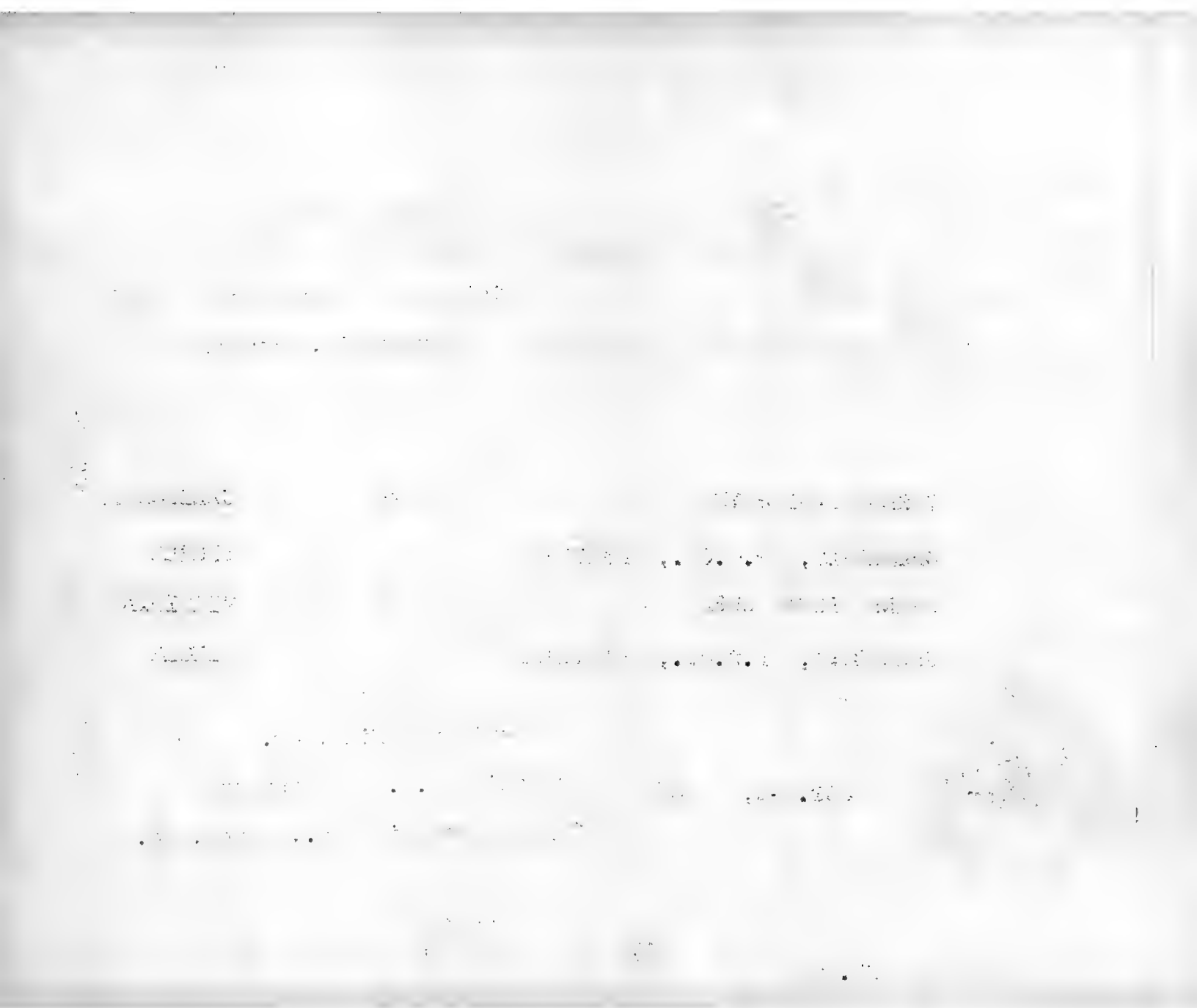
office on **11/5/86**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38861

LICENSE NO.  
66493

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                              |                |        |            |              |
|------------------------------|------------------------------|----------------|--------|------------|--------------|
| Groom's Name                 | GENE IRA SLAVIN              | Age            | 29     | Birthplace | DELAWARE     |
| Groom's Residence            | ANNAPOLIS, A.A.CO., MARYLAND | Marital Status | SINGLE |            |              |
| Bride's Name                 | RUTH CAROL HOOPES            | Age            | 28     | Birthplace | PENNSYLVANIA |
| Bride's Residence            | ANNAPOLIS, A.A.CO., MARYLAND | Marital Status | SINGLE |            |              |
| Relationship to groom if any | NONE                         |                |        |            |              |

002AACC10-14-86#04 \$25.00

Dr. W. Kenneth Lyons, Jr.

Name of Officiating Clergy or Authorized Officer

Elder United Methodist

Title and Religious Denomination or Office

Millersville, Maryland 20018

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 14, 1986

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

License Date OCT. 14, 86



2

## Certificate of Marriage

86-38862

State of Maryland

LICENSE NO.  
66538

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**I Hereby Certify that on the 02nd day of November 19 86the following persons were by me united in marriage at Arnold, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **RICHARD ALLEN BROWN**Age **39** Birthplace **MARYLAND**  
(State)

Groom's

Residence **ARNOLD, A.A.CO., MARYLAND**Marital Status **DIVORCED**

Bride's

Name **IRENE REBECCA HILTERBRICK**Age **29** Birthplace **MARYLAND**  
(State)

Bride's

Residence **ARNOLD, A.A.CO., MARYLAND**Marital Status **DIVORCED**

Relationship to groom if any

**NONE**Rev. Thomas P. William son

Name of Officiating Clergy or Authorized Officer

Pastor Litheran

Title and Religious Denomination or Office

461 College Parkwy. 21012

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 26, 1986License Fee \$25.00T. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38863

LICENSE NO.  
 66601

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Md.  
(City or Town)  
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**PAUL PETER CONTRINO**

Age 23 Birthplace MARYLAND  
(State)

Groom's

Residence

**GLEN BURNIE, A.A. CO., MARYLAND**

Marital Status SINGLE

Bride's

Name

**DEBORAH SUSAN ALLEN**

Age 20 Birthplace MARYLAND  
(State)

Bride's

Residence

**GLEN BURNIE, A.A. CO., MARYLAND**

Marital Status SINGLE

Relationship to groom if any NONE

**Paul Merki**

Name of Officiating Clergy or Authorized Officer

**Ordained Minister, Church of the Nazarene**

Title and Religious Denomination or Office

**2707 Robey Road, Glen Burnie, Md. 21061**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 17, 1986

**E. AUBREY COLLISON, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

\$25.00MA

001AACC10-14-866855

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*Certificate of Marriage*  
*State of Maryland*

86-38864

LICENSE NO.  
 66602

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 11th day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**Jonathan G. Norris**

Age **29**

Birthplace

**Maryland**

Groom's  
 Residence

**Baltimore City, Maryland**

Marital Status

**Divorced**

Bride's  
 Name

**Delphine L. Hill**

Age **26**

Birthplace

**Maryland**

Bride's  
 Residence

**Glen Burnie, A.A. Co., Maryland**

Marital Status

**Single**

Relationship to groom if any

**None**

Laura L. Edwards

Name of Officiating Clergy or Authorized Officer

Ordained Elder United Methodist Church

Title and Religious Denomination or Office

7966 Solley Rd., Glen Burnie, Maryland 2106

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on November 14, 1986

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

License Date **Oct. 14** **86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38865

LICENSE NO.  
 66612

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of 11 191986

the following persons were by me united in marriage at Linthicum

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**MICHAEL J. CLANCY**

Age **27**

Birthplace

**MASS.**  
 (State)

Groom's

Residence

**PASADENA, A.A. CO., MARYLAND**

Marital Status

**DIVORCED**

Bride's

Name

**CHRISTINA D. WIGLESWORTH**

Age **33**

Birthplace

**MARYLAND**  
 (State)

Bride's

Residence

**PASADENA, A.A. CO., MARYLAND**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

Reg. D. Barss

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 16 86**

Minister Linthicum Heights United Methodist

Title and Religious Denomination or Office

Church, Linthicum Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 19, 1986**

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

\$25.00MA

001AAC10-14-866860

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38866

LICENSE NO.  
 66616

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 1986

the following persons were by me united in marriage at Severna, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**NELSON LEROY STONESIFER, JR.**

Age **20**

Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**GLEN BURNIE, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**EDITH ANNE HESS**

Age **23**

Birthplace **MARYLAND**  
(State)

Bride's  
 Residence

**SEVERN, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

Charles A. Donophan

Name of Officiating Clergy or Authorized Officer

Pastor, Te United Methodist Church

Title and Religious Denomination or Office

853 Reece Rd., Severn, Maryland 21144

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 7, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

\$25.00MA

001AACC10-14-866866

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38867

LICENSE NO.  
 66630

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Linthicum, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**James Thomas Tacka**

Age 24 Birthplace Maryland  
(State)

Groom's  
 Residence

**Linthicum, A.A. Co., Maryland**

Marital Status **Single**

Bride's  
 Name

**Amy Beth Childs**

Age 22 Birthplace Maryland  
(State)

Bride's  
 Residence

**Glen Burnie, A.A. Co., Maryland**

Marital Status **Single**

Relationship to groom if any

**None**

Donald L. Emge

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 16** **86**

Pastor Southern Baptist

Title and Religious Denomination or Office

611 S. Camp Meade Road, Linthicum, Maryland

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on 11/5/86

License Fee **25.00**

**AUBREY COLLISON, CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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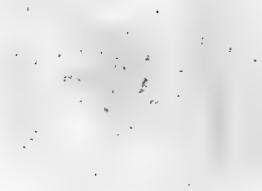
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# Certificate of Marriage

86-38868

## State of Maryland

LICENSE NO.

66632

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                  |                |               |            |                            |
|------------------------------|----------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name                 | <b>JOSEPH AUGUST COOPER, JR.</b> | Age            | <b>20</b>     | Birthplace | <b>MARYLAND</b><br>(State) |
| Groom's Residence            | <b>GLEN BURNIE A.A. CO. MD</b>   | Marital Status | <b>SINGLE</b> |            |                            |
| Bride's Name                 | <b>LAURA LOUISE SROCK</b>        | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br>(State) |
| Bride's Residence            | <b>SEVERN A.A. CO. MD</b>        | Marital Status | <b>SINGLE</b> |            |                            |
| Relationship to groom if any | <b>NONE</b>                      |                |               |            |                            |

**James A. Lange**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 16 86**

**Asst. Pastor St. Paul's Lutheran Church**

Title and Religious Denomination or Office

**308 Oak Manor Drive., Glen Burnie, Maryland**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 11/5/86 **E. AUBREY COLLISON, CLERK**

License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38869

LICENSE NO.  
66640

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Millersville, Marland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |                 |            |                               |
|------------------------------|---------------------------------------|----------------|-----------------|------------|-------------------------------|
| Groom's Name                 | <b>STANLEY B. BENNETT, JR.</b>        | Age            | <b>37</b>       | Birthplace | <b>MAINE</b><br>(State)       |
| Groom's Residence            | <b>CROWNSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                               |
| Bride's Name                 | <b>BARBARA ANN BUCKLAND</b>           | Age            | <b>40</b>       | Birthplace | <b>W. VIRGINIA</b><br>(State) |
| Bride's Residence            | <b>CROWNSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>WIDOW</b>    |            |                               |
| Relationship to groom if any | <b>NONE</b>                           |                |                 |            |                               |

**Dr. W. Kenneth Lyons, Jr.**

Name of Officiating Clergy or Authorized Officer

**Elder United Methodist**

Title and Religious Denomination or Office

**Millersville, Maryland 21100**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 26, 1986**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

License Date **OCT. 16th 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38870

LICENSE NO.  
66641

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15 day of November 19 86

the following persons were by me united in marriage at Edgewater, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                            |
|------------------------------|----------------------------------------|----------------|-----------------|------------|----------------------------|
| Groom's Name                 | <b>Donald Wayne Martin</b>             | Age            | <b>32</b>       | Birthplace | <b>Maryland</b><br>(State) |
| Groom's Residence            | <b>Edgewater, A.A. Co., Maryland</b>   | Marital Status | <b>Divorced</b> |            |                            |
| Bride's Name                 | <b>Antionette Mary Romano</b>          | Age            | <b>21</b>       | Birthplace | <b>Maryland</b><br>(State) |
| Bride's Residence            | <b>Crownsville, A.A. Co., Maryland</b> | Marital Status | <b>Single</b>   |            |                            |
| Relationship to groom if any | <b>None</b>                            |                |                 |            |                            |

q

License Date **Oct. 16** **86**

Re. Ronald E. Eskins

Name of Officiating Clergy or Authorized Officer

Pastor Oglehart Church of God

Title and Religious Denomination or Office

1737 Od1 Gen Hyway Annapolis, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38871

LICENSE NO.  
 66645

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 7th day of November 19 86

the following persons were by me united in marriage at Edgewater, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                            |                 |           |                |                                           |
|------------------------------|----------------------------|-----------------|-----------|----------------|-------------------------------------------|
| Groom's Name                 | <b>CHARLES W. MITCHELL</b> | Age             | <b>68</b> | Birthplace     | <b>VIRGINIA</b><br><small>(State)</small> |
| Groom's Residence            | <b>EDGEWATER</b>           | <b>A.A. CO.</b> | <b>MD</b> | Marital Status | <b>WIDOWER</b>                            |
| Bride's Name                 | <b>IDA A. SIMPSON</b>      | Age             | <b>67</b> | Birthplace     | <b>PENN.</b><br><small>(State)</small>    |
| Bride's Residence            | <b>MAYO</b>                | <b>A.A. CO.</b> | <b>MD</b> | Marital Status | <b>WIDOW</b>                              |
| Relationship to groom if any | <b>NONE</b>                |                 |           |                |                                           |

Paul K. Cummins

Name of Officiating Clergy or Authorized Officer

Minister Woodland Beach Community

Title and Religious Denomination or Office

104 Stewart Dr. Edgewater, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 10, 1986

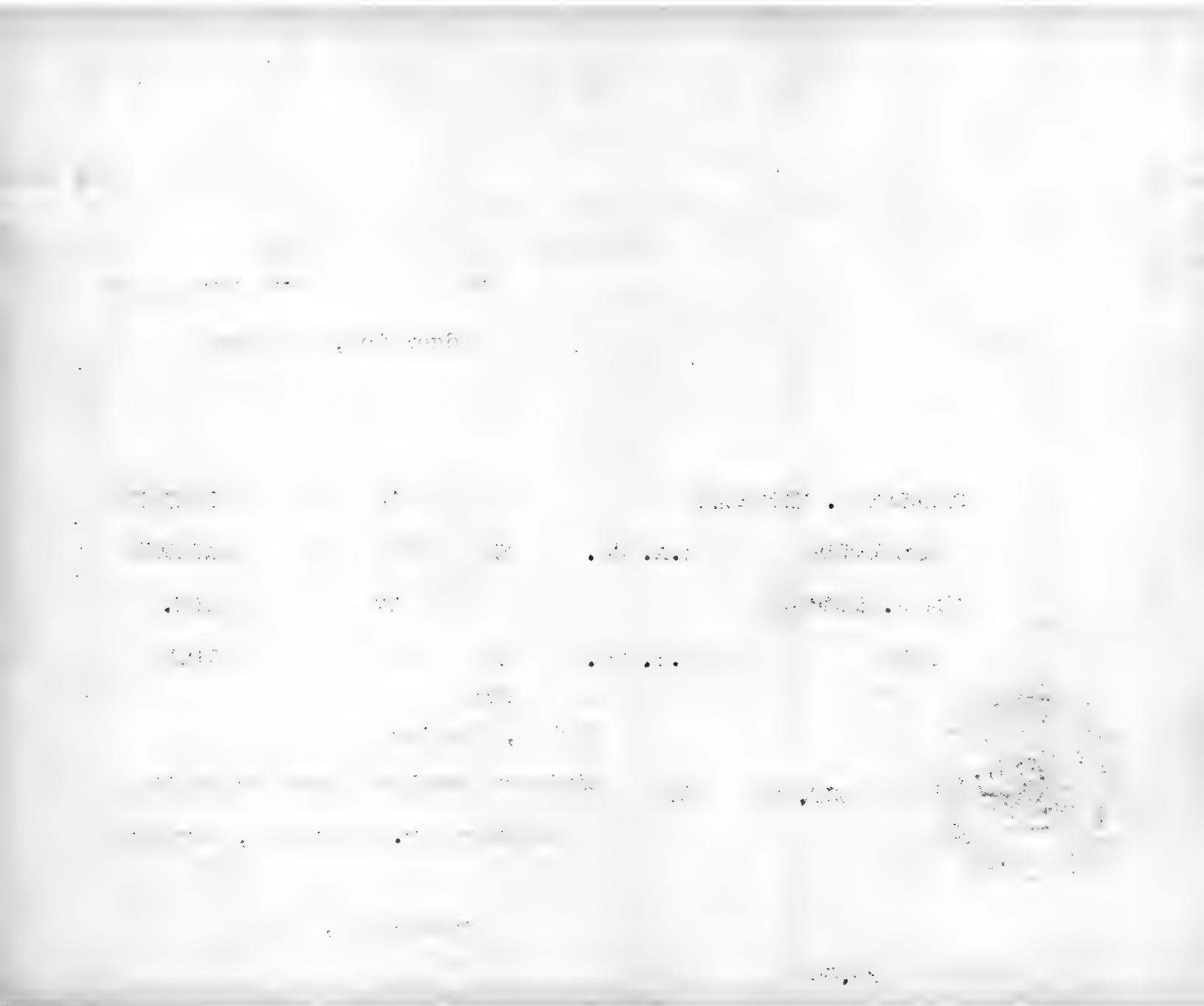
E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ **25.00**

License Date **OCT. 16 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38872

LICENSE NO.

66649

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Annaplis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**Herbert Clark Trott**

Age **40** Birthplace **N. Carolina**  
(State)

Groom's

Residence

**Friendship, A.A. Co., Maryland**

Marital Status

**Divorced**

Bride's

Name

**Elizabeth Ann Baginski**

Age **32** Birthplace **Maryland**  
(State)

Bride's

Residence

**Severna Park, A.A. Co., Maryland**

Marital Status

**Single**

Relationship to groom if any

**None****Rev. G. Holmes Mendelman**

Name of Officiating Clergy or Authorized Officer

**Pastor, St. Paul Lutheran Church**

Title and Religious Denomination or Office

**Roscoe Rowe. Blvd, Annaplis, Marland**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986  
E. ABBREY COLLISON, CLERK

License Fee **\$25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

Religion, Philosophy

1. The first part of the book is devoted to a general survey of the history of religion and philosophy. It begins with a discussion of the origin of religion and the development of religious thought. It then proceeds to a survey of the history of philosophy, from the ancient Greeks to the modern era. The second part of the book is devoted to a detailed study of the philosophy of religion. It begins with a discussion of the nature of God and the existence of the soul. It then proceeds to a study of the various religious traditions and their philosophical foundations. The third part of the book is devoted to a study of the philosophy of ethics. It begins with a discussion of the nature of good and evil and the foundations of moral law. It then proceeds to a study of the various ethical systems and their philosophical foundations. The fourth part of the book is devoted to a study of the philosophy of politics. It begins with a discussion of the nature of the state and the foundations of political law. It then proceeds to a study of the various political systems and their philosophical foundations. The fifth part of the book is devoted to a study of the philosophy of art and literature. It begins with a discussion of the nature of art and the foundations of aesthetic theory. It then proceeds to a study of the various art and literary movements and their philosophical foundations. The sixth part of the book is devoted to a study of the philosophy of science. It begins with a discussion of the nature of science and the foundations of scientific theory. It then proceeds to a study of the various scientific movements and their philosophical foundations. The seventh part of the book is devoted to a study of the philosophy of religion. It begins with a discussion of the nature of religion and the foundations of religious thought. It then proceeds to a study of the various religious traditions and their philosophical foundations. The eighth part of the book is devoted to a study of the philosophy of ethics. It begins with a discussion of the nature of good and evil and the foundations of moral law. It then proceeds to a study of the various ethical systems and their philosophical foundations. The ninth part of the book is devoted to a study of the philosophy of politics. It begins with a discussion of the nature of the state and the foundations of political law. It then proceeds to a study of the various political systems and their philosophical foundations. The tenth part of the book is devoted to a study of the philosophy of art and literature. It begins with a discussion of the nature of art and the foundations of aesthetic theory. It then proceeds to a study of the various art and literary movements and their philosophical foundations. The eleventh part of the book is devoted to a study of the philosophy of science. It begins with a discussion of the nature of science and the foundations of scientific theory. It then proceeds to a study of the various scientific movements and their philosophical foundations. The twelfth part of the book is devoted to a study of the philosophy of religion. It begins with a discussion of the nature of religion and the foundations of religious thought. It then proceeds to a study of the various religious traditions and their philosophical foundations.



2

*Certificate of Marriage*  
*State of Maryland*

86-38873

LICENSE NO.  
 66682

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Ft. Meade, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                           |                |               |            |                                            |
|------------------------------|-------------------------------------------|----------------|---------------|------------|--------------------------------------------|
| Groom's Name                 | <b>Willard Clark Parrish</b>              | Age            | <b>32</b>     | Birthplace | <b>Minnesota</b><br><small>(State)</small> |
| Groom's Residence            | <b>Baltimore, Baltimore Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                            |
| Bride's Name                 | <b>Leslie Ellen Sykes</b>                 | Age            | <b>28</b>     | Birthplace | <b>Missouri</b><br><small>(State)</small>  |
| Bride's Residence            | <b>Baltimore, Baltimore Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                            |
| Relationship to groom if any | <b>None</b>                               |                |               |            |                                            |

John W. Smith

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 20** **86**

Chaplain LTC USA Roman Catholic

Title and Religious Denomination or Office

USAG Ft. Meade, Maryland 20775

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 28, 1986**

License Fee **\$25.00**

**AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38874

LICENSE NO.  
 66683

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Severna Park, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                      |                |                                                      |
|------------------------------|--------------------------------------|----------------|------------------------------------------------------|
| Groom's Name                 | <b>BRIAN BARRETT MONKS</b>           | Age <b>34</b>  | Birthplace <b>NEW YORK</b><br><small>(State)</small> |
| Groom's Residence            | <b>BALTIMORE, HOW. CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                        |
| Bride's Name                 | <b>PAULA JEAN WRIGHT</b>             | Age <b>30</b>  | Birthplace <b>NEW YORK</b><br><small>(State)</small> |
| Bride's Residence            | <b>BALTIMORE, HOW. CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                        |
| Relationship to groom if any | <b>NONE</b>                          |                |                                                      |

Gerald W. Weiss

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 20th** **86**

Pastor--Severna Park United Methodist Church  
Title and Religious Denomination or Office

731 Benfield Road Severna Park, MD  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 18, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38875

LICENSE NO.  
 66688

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**JOHN EDWARD HARRISON**

Age 24

Birthplace MARYLAND  
(State)

Groom's  
 Residence

**HANOVER, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**BONNIE LYN PLUMMER**

Age 24

Birthplace MARYLAND  
(State)

Bride's  
 Residence

**HANOVER, A.A.CO., MARYLAND**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

Paul T. Dahlenfeldt

Name of Officiating Clergy or Authorized Officer

Pastor. St. Pal Lutheran Church

Title and Religious Denomination or Office

93 Roads End Lane, Severna Park, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

E. AUBREY COLLISON, CLERK

License Fee \$25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38876

LICENSE NO.  
66691

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Odenotn, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                      |                |               |            |                 |
|------------------------------|--------------------------------------|----------------|---------------|------------|-----------------|
| Groom's Name                 | <b>David N. Cullen</b>               | Age            | <b>21</b>     | Birthplace | <b>Maryland</b> |
| Groom's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                 |
| Bride's Name                 | <b>Donna J. Adams</b>                | Age            | <b>20</b>     | Birthplace | <b>Maryland</b> |
| Bride's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                 |
| Relationship to groom if any | <b>None</b>                          |                |               |            |                 |

Robert H. Bell

Name of Officiating Clergy or Authorized Officer

Reverend First Ev. Lutheran Church

Title and Religious Denomination or Office

Odenotn & telegraph Roads, Odenton, MD 211

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

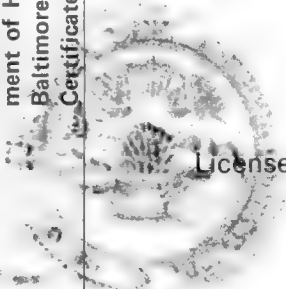
I hereby certify that the above is a true copy of a record filed in this

office on November 6, 1986

E. AUBREY COLLISON, CLERK

Signature Clerk of

License Fee \$25.00







2

*Certificate of Marriage*  
*State of Maryland*

86-38877

LICENSE NO.  
 66694

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Linthicum Heights  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

**David Wayne Neighoff**

Age **26**

Birthplace **Maryland**  
(State)

Groom's

Residence

**Linthicum, A.A. Co., Maryland**

Marital Status

**Single**

Bride's

Name

**Judith Camille Buffington**

Age **22**

Birthplace **Maryland**  
(State)

Bride's

Residence

**Glen Burnie, A.A. Co., Maryland**

Marital Status

**Single**

Relationship to groom if any

**None**

Reg. D. Barss

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 20th** **86**

Pastor, Linthicum, Hghts. United Methodsit  
Title and Religious Denomination or Office **Church**

200 School Lane, Linthiucm, MD 21090  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 19, 1986

**E. AUBREY COLLISON, CLERK**

License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38878

LICENSE NO.  
 66696

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**DONALD J. RUSSELL**

Age **28**

Birthplace **MARYLAND**

Groom's  
 Residence

**ANNAPOLIS, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**PAMELA J. LYTTLE**

Age **23**

Birthplace **VIRGINIA**

Bride's  
 Residence

**ANNAPOLIS, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**Fred T. Moffatt, Jr.**

Name of Officiating Clergy or Authorized Officer

**Pastor Heritage Baptist Church**

Title and Religious Denomination or Office

**Annapolis, Maryland**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**11/5/86**

License Fee \$ **25.00**

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

\$25.00MA

001AACC10-16-866887

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38879

LICENSE NO.  
66697

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Severn Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                  |                |               |            |                             |
|------------------------------|----------------------------------|----------------|---------------|------------|-----------------------------|
| Groom's Name                 | <b>DANIEL JOSEPH MC AFEE</b>     | Age            | <b>33</b>     | Birthplace | <b>MARYLAND</b><br>(State)  |
| Groom's Residence            | <b>SEVERN, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                             |
| Bride's Name                 | <b>NANCY KAY SKIDMORE</b>        | Age            | <b>29</b>     | Birthplace | <b>WASH.D.C.</b><br>(State) |
| Bride's Residence            | <b>SEVERN, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                             |
| Relationship to groom if any | <b>NONE</b>                      |                |               |            |                             |

James E. Bishop

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 20, 86**

Pastor Glen Burnie, Maryland Baptist Church

Title and Religious Denomination or Office

Glen Burnie, MD 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 26, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38880

LICENSE NO.  
 66702

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 16th day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                    |                |                                                      |
|------------------------------|------------------------------------|----------------|------------------------------------------------------|
| Groom's Name                 | <b>MATTHEW MARK WYSONG</b>         | Age <b>21</b>  | Birthplace <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                        |
| Bride's Name                 | <b>MICHELLE ANN FRONCKOWSKI</b>    | Age <b>20</b>  | Birthplace <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                        |
| Relationship to groom if any | <b>NONE</b>                        |                |                                                      |

Charles E. Harvey

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 20th** **86**

Pastor Community United Methodist Church

Title and Religious Denomination or Office

238 Harlem Rd., Riviera Beach, MD 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 18, 1986

License Fee \$ 25.00

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

86-38881

## State of Maryland

LICENSE NO.

66704

Copy for State Department of Health and Mental Hygiene

### ANNE ARUNDEL COUNTY (02)

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

STEPHEN MICHAEL SZYMANSKI

Age 20

Birthplace

MARYLAND  
(State)

Groom's  
Residence

GLEN BURNIE

A.A. CO.

MD

Marital Status

SINGLE

Bride's  
Name

CHRISTAL RENAE SCARDINA

Age 20

Birthplace

MARYLAND  
(State)

Bride's  
Residence

GLEN BURNIE

A.A. CO.

MD

Marital Status

SINGLE

Relationship to groom if any

NONE

Rev. Elmer L. Zick

Name of Officiating Clergy or Authorized Officer

License Date OCT. 20 86

Pastor Christ Lutheran Church

Title and Religious Denomination or Office

8245 Jumpers Hole Road Millersville, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

E AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38882

LICENSE NO.  
 66714

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of november 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                                               |
|------------------------------|----------------------------------------|----------------|-----------------|------------|-----------------------------------------------|
| Groom's Name                 | <b>ROCCO ANTHONY LYATE</b>             | Age            | <b>43</b>       | Birthplace | <b>PENNSYLVANIA</b><br><small>(State)</small> |
| Groom's Residence            | <b>MILLERSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                                               |
| Bride's Name                 | <b>ROBIN LYNN POLCZYNSKI</b>           | Age            | <b>27</b>       | Birthplace | <b>MARYLAND</b><br><small>(State)</small>     |
| Bride's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b>  | Marital Status | <b>SINGLE</b>   |            |                                               |
| Relationship to groom if any | <b>NONE</b>                            |                |                 |            |                                               |

Richard E. Nowers

Name of Officiating Clergy or Authorized Officer

Minister United Methodist Church

Title and Religious Denomination or Office

61 Ritchie Highway, Pasadena, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 11/5/86

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

License Date **OCT. 22, 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38883

LICENSE NO.  
 66718

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Crofton, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**ROGER ERNEST REEDY**

Age **31** Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**CROFTON, A.A.CO., MARYLAND**

Marital Status **DIVORCED**

Bride's  
 Name

**DONNA MARIE MICHAEL**

Age **26** Birthplace **NEW HAMPSHIRE**  
(State)

Bride's  
 Residence

**BOWIE, P.G.CO. MARYLAND**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**Jesse Cover, Jr.**

Name of Officiating Clergy or Authorized Officer

**Pastor-Lanham Church of God**

Title and Religious Denomination or Office

**9029 First St., Lanham, MD 20706**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **November 12, 1986**

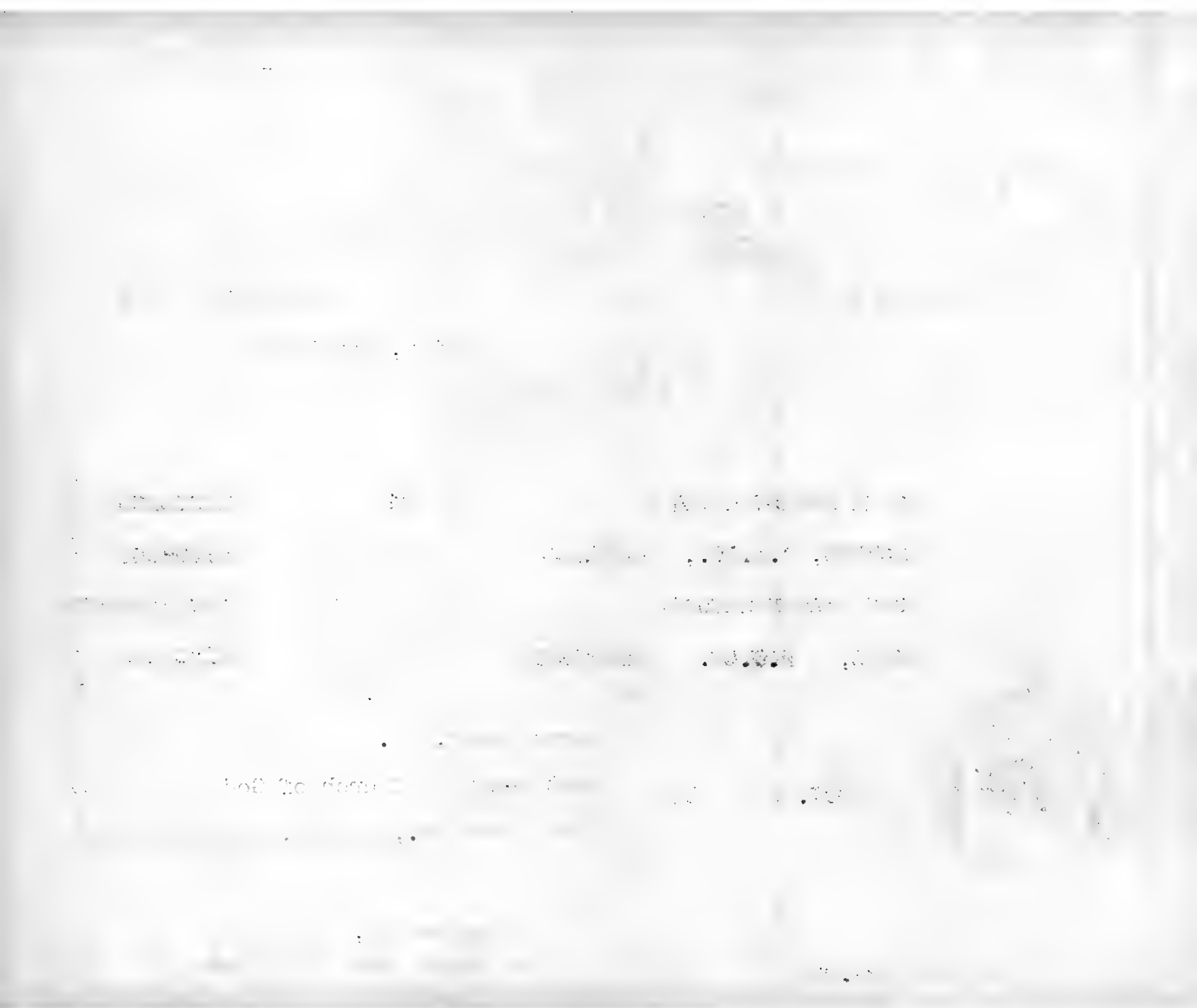
**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Date **OCT. 22 86**

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38884

LICENSE NO.  
 66722

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8<sup>th</sup> day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |               |            |                                           |
|------------------------------|-------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>JOHN JEFFERSON JAYSON, JR.</b>   | Age            | <b>30</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>KAREN LEE WILSON</b>             | Age            | <b>24</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>GAMBRILLS, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                         |                |               |            |                                           |

Bishop Wilbert L. Baltimore

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 22nd**

**86**

Pastor Holy Temple Chirch of AnnaplisInc

Title and Religious Denomination or Office

876 Marengo St. Annapolis Maryland 21403

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 19, 1986

License Fee \$ 25.00

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38885

LICENSE NO.  
 66733

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                         |                 |           |                |                                             |
|------------------------------|-------------------------|-----------------|-----------|----------------|---------------------------------------------|
| Groom's Name                 | <b>MARK W. MCCOMAS</b>  | Age             | <b>33</b> | Birthplace     | <b>MARYLAND</b><br><small>(State)</small>   |
| Groom's Residence            | <b>SEVERN</b>           | <b>A.A. CO.</b> | <b>MD</b> | Marital Status | <b>SINGLE</b>                               |
| Bride's Name                 | <b>M. THERESE LEAHY</b> | Age             | <b>31</b> | Birthplace     | <b>WASH. D.C.</b><br><small>(State)</small> |
| Bride's Residence            | <b>ANNAPOLIS</b>        | <b>A.A. CO.</b> | <b>MD</b> | Marital Status | <b>SINGLE</b>                               |
| Relationship to groom if any | <b>NONE</b>             |                 |           |                |                                             |

**Rev. Robert C. Jones**

Name of Officiating Clergy or Authorized Officer

**Roman Catholic Priest**

Title and Religious Denomination or Office

**109 Duke of Gloucester, Annapolis, MD**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

**21403**

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 24, 1986**

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

License Fee \$ **25.00**

License Date **OCT. 22 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

[illegible]

1994

Journal of Interpersonal Violence 28(10)

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Lichtenthal and Whistler (1973).

2

*Certificate of Marriage*  
*State of Maryland*

86-30086

LICENSE NO.  
 66736

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                 |
|------------------------------|----------------------------------------|----------------|-----------------|------------|-----------------|
| Groom's Name                 | <b>James E. Dowell</b>                 | Age            | <b>42</b>       | Birthplace | <b>Maryland</b> |
| Groom's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Divorced</b> |            |                 |
| Bride's Name                 | <b>Eva L. Vacek</b>                    | Age            | <b>34</b>       | Birthplace | <b>Maryland</b> |
| Bride's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Divorced</b> |            |                 |
| Relationship to groom if any | <b>None</b>                            |                |                 |            |                 |

John R. Esaias, Jr.

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 23** **86**

Pastor, Glen Burnie, United Methodist Church

Title and Religious Denomination or Office

5 second Ave., Se. Glen Burnie, MD 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

**A. AUBREY COLLISON, CLERK**

License Fee \$25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38887

LICENSE NO.  
 66741

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**SEAN CURTIS REED**

Age **22** Birthplace **ALASKA**  
(State)

Groom's

Residence

**GLEN BURNIE, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Bride's

Name

**STEPHANIE LYNN HORNATKO**

Age **22** Birthplace **MARYLAND**  
(State)

Bride's

Residence

**GLEN BURNIE, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**Elmer L. Zick**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 23rd 86**

**Pastor Christ . Lutheran Church**

Title and Religious Denomination or Office

**8245 Jumpers Hole Rd., Millersville, Md.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **11/5/86**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

86-38888

## State of Maryland

LICENSE NO.

66742

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 21st day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**JEROME JOSEPH VACEK, JR.**Age **35**Birthplace **MARYLAND**  
(State)

Groom's  
Residence

**GLEN BURNIE, A.A.CO., MARYLAND**

Marital Status

**DIVORCED**

Bride's  
Name

**KAREN LEANORA SCHMIDT**Age **34**Birthplace **MARYLAND**  
(State)

Bride's  
Residence

**GLEN BURNIE, A.A.CO., MARYLAND**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE****Bernard E. Fogel**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 23rd** **86****Minister Messiah United Methodist Church**

Title and Religious Denomination or Office

**20 Thomas Road, Glen Burnie, Maryland 2061**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **December 1, 1986****H. ERLE SCHAFER, CLERK**License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38889

LICENSE NO.  
66745

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Riviera Beach, Maryland  
(City or Town)  
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                    |                |               |            |                            |
|------------------------------|------------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name                 | <b>RICHARD SCOTT ARNOLD</b>        | Age            | <b>24</b>     | Birthplace | <b>NEW YORK</b><br>(State) |
| Groom's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                            |
| Bride's Name                 | <b>BERNICE LA RUE ELLERMAN</b>     | Age            | <b>23</b>     | Birthplace | <b>MARYLAND</b><br>(State) |
| Bride's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                            |
| Relationship to groom if any | <b>NONE</b>                        |                |               |            |                            |

Charles F. Muth

Name of Officiating Clergy or Authorized Officer

Pastor-St. Jane Frances Roman Catholic Church

Title and Religious Denomination or Office

8499 Virginia Avenue, Pasadena, MD 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 6, 1986

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

License Date OCT. 24, 86

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38890

LICENSE NO.  
 66746

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |               |            |                                           |
|------------------------------|---------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>RICHARD EDWARD BUTLER, II</b>      | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>STACY ANN LAYMAN</b>               | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                           |                |               |            |                                           |

Donald V. Grohs

Name of Officiating Clergy or Authorized Officer

Pastor, American Lutheran Church

Title and Religious Denomination or Office

1506 Church Lane Glen Burnie, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 19, 1986

E. AUBREY COLLISON, CLERK

Signature of Clerk of the Court

License Fee \$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38891

LICENSE NO.

66750

Copy for State Department of Health and Mental Hygiene

## ANNE ARUNDEL COUNTY (02)

*I Hereby Certify* that on the 8th day of Novmeber 19 86

the following persons were by me united in marriage at Severna Park, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

HAL DENMARK STEELE

Age 31Birthplace GERMANY  
(State)

Groom's

Residence

PASADENA, A.A.CO., MARYLAND

Marital Status

DIVORCED

Bride's

Name

SHEREE JEAN ANDERS

Age 30Birthplace MARYLAND  
(State)

Bride's

Residence

PASADENA, A.A.CO., MARYLAND

Marital Status

DIVORCED

Relationship to groom if any

NONE

Gerlad W. Weiss

Name of Officiating Clergy or Authorized Officer

License Date OCT. 24,

86

Pastor Severna Park United Methodist Church

Title and Religious Denomination or Office

731 Benfield Road, Severna Park, MD 21146

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Novmeber 13, 1986

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38892

LICENSE NO.  
 66753

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Annapolis, Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |               |            |                   |
|------------------------------|-------------------------------------|----------------|---------------|------------|-------------------|
| Groom's Name                 | <b>WILLIAM P. HEYER</b>             | Age            | <b>34</b>     | Birthplace | <b>NEW JERSEY</b> |
|                              |                                     |                |               | (State)    |                   |
| Groom's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                   |
| Bride's Name                 | <b>MARGARET R. FORMAN</b>           | Age            | <b>29</b>     | Birthplace | <b>NEW JERSEY</b> |
|                              |                                     |                |               | (State)    |                   |
| Bride's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                   |
| Relationship to groom if any | <b>NONE</b>                         |                |               |            |                   |

Bruton Strange

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 24, 86**

Episco pol Minister

Title and Religious Denomination or Office

200 Fiddlers Hill Rd., Edgewater, Md. 21037

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on November 17, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38893

LICENSE NO.  
66759

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                      |                |               |            |                            |
|------------------------------|--------------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name                 | <b>Kenneth Tehon Egor</b>            | Age            | <b>18</b>     | Birthplace | <b>New York</b><br>(State) |
| Groom's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                            |
| Bride's Name                 | <b>Brenda Ann Jackson</b>            | Age            | <b>18</b>     | Birthplace | <b>Maryland</b><br>(State) |
| Bride's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                            |
| Relationship to groom if any | <b>None</b>                          |                |               |            |                            |

Rev. Roalnd C. Smith

Name of Officiating Clergy or Authorized Officer

Pastor Weems Creek Baptist Church

Title and Religious Denomination or Office

661 Ridgely Ave. Annapolis, Maryland 21403

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 3, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$25.00

License Date Oct. 24 86

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38894

LICENSE NO.  
 66762

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Arnold, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**PAUL K. COUSER**

Age 42

Birthplace NEW YORK  
(State)

Groom's  
 Residence

**ARNOLD, A.A.CO., MARYLAND**

Marital Status

**DIVORCED**

Bride's  
 Name

**PEGGY ELLEN BUTTRILL**

Age 36

Birthplace MARYLAND  
(State)

Bride's  
 Residence

**ARNOLD, A.A.CO., MARYLAND**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

M.E. Leftwich

Name of Officiating Clergy or Authorized Officer

United Methodist Minister

Title and Religious Denomination or Office

78 Church Road, Arnold, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 11/20/86

E. AUBREY COLLISO

Signature - Clerk of the Court

License Fee \$25.00

License Date **OCT. 27** **86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38895

LICENSE NO.  
 66763

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 1986

the following persons were by me united in marriage at Annapolis, Maryland  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                  |                |                 |            |                           |
|------------------------------|----------------------------------|----------------|-----------------|------------|---------------------------|
| Groom's Name                 | <b>JAMES R. BRINSLEY</b>         | Age            | <b>48</b>       | Birthplace | <b>INDIANA</b><br>(State) |
| Groom's Residence            | <b>ARNOLD, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                           |
| Bride's Name                 | <b>MARGARET W. MASSON</b>        | Age            | <b>46</b>       | Birthplace | <b>ENGLAND</b><br>(State) |
| Bride's Residence            | <b>ARNOLD, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                           |
| Relationship to groom if any | <b>NONE</b>                      |                |                 |            |                           |

**Peter Caputot**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 27, 86**

**The Rev. Canon**

Title and Religious Denomination or Office

**St. Charles Church, Annapolis, Md.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on 11/5/86

License Fee \$ **25.00**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

86-38896

State of Maryland

LICENSE NO.

66767

Copy for State Department of Health and Mental Hygiene

ANNE ARUNDEL COUNTY (02)

I Hereby Certify that on the 15th day of November 19 86the following persons were by me united in marriage at Pasadena, Maryland

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

RAYMOND EUGENE ENSEY

Age 28Birthplace MARYLAND

Groom's

Residence

PASADENA,

A.A. CO.

MD

Marital Status

SINGLE

Bride's

Name

MARIBETH BEAZELL

Age 25Birthplace PENNSYLVANIA

Bride's

Residence

PASADENA,

A.A. CO.

MD

Marital Status

SINGLE

Relationship to groom if any NONE

James E. Davis

Name of Officiating Clergy or Authorized Officer

Magothy United Methodist Church

Title and Religious Denomination or Office

3703 Mountain Rd., Pasadena, MD 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 21, 1986  
E. AUBREY COLLISON, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38897

LICENSE NO.  
 66770

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |                 |            |                                           |
|------------------------------|-------------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>RAYMOND NELLIS FULTON, JR.</b>   | Age            | <b>34</b>       | Birthplace | <b>VIRGINIA</b><br><small>(State)</small> |
| Groom's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                                           |
| Bride's Name                 | <b>NANCY COLLEEN GALLIGAN</b>       | Age            | <b>28</b>       | Birthplace | <b>VIRGINIA</b><br><small>(State)</small> |
| Bride's Residence            | <b>ANNAPOLIS, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>   |            |                                           |
| Relationship to groom if any | <b>NONE</b>                         |                |                 |            |                                           |

Rev. Fredric J. Muir

Name of Officiating Clergy or Authorized Officer

Minister Unitarian Universalist

Title and Religious Denomination or Office

333 Dubois Road, Annapolis, MD 21401

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 12, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

1. 1947

2. 1948

3. 1949

4. 1950

1. 1947

2. 1948

3. 1949

4. 1950

1. 1947

2. 1948

3. 1949

1947

2

*Certificate of Marriage*  
*State of Maryland*

86-38898

LICENSE NO.  
 66771

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 7th day of November 19 86

the following persons were by me united in marriage at Ft. Meade, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

**MARK DOUGLAS DEEDS**

Age **34**

Birthplace **KANSAS**  
(State)

Groom's

Residence

**SEVERN, A.A.CO., MARYLAND**

Marital Status

**DIVORCED**

Bride's

Name

**SANDRA PERKINS LITKE**

Age **30**

Birthplace **HAWAII**  
(State)

Bride's

Residence

**SEVERN, A.A.CO., MARYLAND**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

Dennis M. Ball

Name of Officiating Clergy or Authorized Officer

License Date **Oct 27th**

**86**

U.S. Army Chaplain Southern Baptist Conv.

Title and Religious Denomination or Office

2682 B. Buckner Ave. Ft. Meade, MD 20755

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Novmeber 13, 1986

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

86-38899

State of Maryland

LICENSE NO.

66774

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**I Hereby Certify that on the 8th day of November 19 86the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**MICHAEL PATRICK COLLINS**Age 23 Birthplace WASH. DC.  
(State)Groom's  
Residence**PASADENA A.A. CO.****MD Marital Status SINGLE**Bride's  
Name**LISA MARIE BURNS**Age 21 Birthplace MARYLAND  
(State)

Bride's

Residence

**PASADENA A.A. CO.****MD Marital Status SINGLE**

Relationship to groom if any

**NONE**Rev. Walter J. Paulits

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 27** **86**Roman Catholic Priest

Title and Religious Denomination or Office

8325 Ventnor Rd., Pasadena, Maryland 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 14, 1986License Fee \$ **25.00**E. AUBREY COLLISON, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38900

LICENSE NO.  
 66775

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 5th day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**RICHARD TOWNSEND MEYER**

Age **61** Birthplace **PENNSYLVANIA**  
(State)

Groom's

Residence

**CROFTON, A.A.CO., MARYLAND**

Marital Status **DIVORCED**

Bride's

Name

**FAYE MARIE KELLY**

Age **45** Birthplace **MARYLAND**  
(State)

Bride's

Residence

**CROFTON, A.A.CO., MARYLAND**

Marital Status **WIDOW**

Relationship to groom if any

**NONE**

James Patrick Morgan

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 27th 86**

Episcopal Minister

Title and Religious Denomination or Office

Chapel USNA Annapolis, MD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 10, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38901

LICENSE NO.  
 66777

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Ft. Meade, a Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**CURTIS BRIEN SYKES, JR.**

Age **29** Birthplace **MARYLAND**  
(State)

Groom's

Residence

**ELKRIDGE, HOW. CO., MARYLAND**

Marital Status **SINGLE**

Bride's

Name

**SHELBY LYNN ROSE**

Age **23** Birthplace **MARYLAND**  
(State)

Bride's

Residence

**HANOVER, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

Gerald L. Truman

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 27, 86**

Chaplain, U.S. Army

Title and Religious Denomination or Office

Main Post Chapel Ft. George G. Meade, MD

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on November 12, 1986  
E. AUBREY COLLISON, CLERK

License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38902

LICENSE NO.  
66787

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                       |                |               |            |                            |
|------------------------------|---------------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name                 | <b>VERNON AUSTIN</b>                  | Age            | <b>30</b>     | Birthplace | <b>MARYLAND</b><br>(State) |
| Groom's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                            |
| Bride's Name                 | <b>TAVESIA MARIA JONES</b>            | Age            | <b>26</b>     | Birthplace | <b>MARYLAND</b><br>(State) |
| Bride's Residence            | <b>GLEN BURNIE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                            |
| Relationship to groom if any | <b>NONE</b>                           |                |               |            |                            |

Richard L. Grammer

Name of Officiating Clergy or Authorized Officer

Pastor Granite Baptist Church

Title and Religious Denomination or Office

7823 Oakwood Rd., Glen Burnie, MD 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 6, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court



2

*Certificate of Marriage*  
*State of Maryland*

86-38903

LICENSE NO.  
 66788

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 1986

the following persons were by me united in marriage at Crofton, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**MICHAEL SCOTT LEDGER**

Age 24 Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**BOWIE, PR. GEO. CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**BRENDA MARIE MAYHEW**

Age 28 Birthplace **MARYLAND**  
(State)

Bride's  
 Residence

**BOWIE, PR. GEO. CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**Donald M. Brower**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 27** **86**

**Clergy Presbyterian Church**

Title and Religious Denomination or Office

**1657 Crofton Pkwy Crofton MD 21114**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 24, 1986**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

\$25.00MA

001AACC10-27-866931

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

86-38904

LICENSE NO.

66790

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Arnold, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JEFFREY REED BROWN

Age 19 Birthplace OHIO  
(State)

Groom's  
Residence

ARNOLD A.A. CO.

MD Marital Status SINGLE

Bride's  
Name

GAIL DARLENE FRY

Age 19 Birthplace OREGON  
(State)

Bride's  
Residence

ARNOLD A.A. CO.

MD Marital Status SINGLE

Relationship to groom if any

NONE

Roger W. Fry

Name of Officiating Clergy or Authorized Officer

License Date OCT. 27 86

Minister Church of Christ of Arnold

Title and Religious Denomination or Office

1595 Ritchie Highway, Arnold, Maryland 2110

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

E. AUBREY COLLISON, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38905

LICENSE NO.  
 66793

Copy for State Department of Health and Mental Hygiene  
**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 6th day of November 19 86

the following persons were by me united in marriage at Severn, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                         |                |               |            |                                              |
|------------------------------|-----------------------------------------|----------------|---------------|------------|----------------------------------------------|
| Groom's Name                 | <b>Stanford M. Owens</b>                | Age            | <b>22</b>     | Birthplace | <b>N. Carolina</b><br><small>(State)</small> |
| Groom's Residence            | <b>Millersville, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                              |
| Bride's Name                 | <b>Quay L. Williams</b>                 | Age            | <b>20</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small>    |
| Bride's Residence            | <b>Crownsville, A.A. Co., Maryland</b>  | Marital Status | <b>Single</b> |            |                                              |
| Relationship to groom if any | <b>None</b>                             |                |               |            |                                              |

Rev. Ivan J. Jackson

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 29** **86**

Baptist Minister

Title and Religious Denomination or Office

8319 Bubbs Drive, Severn, MD 21143

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 10, 1986

License Fee \$ 25.00

E. AUBREY COLLISON, CLERK

E. AUBREY COLLISON, CLERK  
Signature Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38906

LICENSE NO.  
 66798

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Riviera Beach, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**GERARD ANTHONY DONOHUE**

Age **23**

Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**GLEN BURNIE, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**ALISON JENNIFER HAMILTON**

Age **22**

Birthplace **MARYLAND**  
(State)

Bride's  
 Residence

**PASADENA, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

Charles F. Muth

Name of Officiating Clergy or Authorized Officer

Pastor, St. Jane Frances Catholic Church

Title and Religious Denomination or Office

8499 Virginia Ave., Pasadena, MD 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 12, 1986

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38907

LICENSE NO.  
66799

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 29th day of November 1986

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                      |                |               |            |                            |
|------------------------------|--------------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name                 | <b>Clyde A. Copeland</b>             | Age            | <b>32</b>     | Birthplace | <b>Virginia</b><br>(State) |
| Groom's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                            |
| Bride's Name                 | <b>Faye B. Currie</b>                | Age            | <b>27</b>     | Birthplace | <b>Maryland</b><br>(State) |
| Bride's Residence            | <b>Annapolis, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                            |
| Relationship to groom if any | <b>None</b>                          |                |               |            |                            |

**Rev. Robert C. Jones**

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 29** **86**

**Roman Catholic Priest**

Title and Religious Denomination or Office

**109 Duke of Gloucester St. Annapolis**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **December 2, 1986**

License Fee \$ **25.00**

**H. ERLE SCHAFFER, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38908

LICENSE NO.  
 66803

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                     |                |               |            |                                           |
|------------------------------|-------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>Michael Bryan Jordan</b>         | Age            | <b>22</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Groom's Residence            | <b>Pasadena, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Bride's Name                 | <b>Lori Patricia McLaughlin</b>     | Age            | <b>20</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Bride's Residence            | <b>Pasadena, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                         |                |               |            |                                           |

**Msgr. Charles F. Muth**

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 29**

**86**

**Pastor, St. Jane Frances de Chantal Catholi**

Title and Religious Denomination or Office

**church**

**8499 Virginia Avenue, Pasadena, 21122**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **December 1, 1986**

**H. ERLE SCHAFFER, CLERK**

Signature - Clerk of the Court

License Fee **\$5.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38909

LICENSE NO.  
 66804

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                    |                |                 |            |                                           |
|------------------------------|------------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>KEVIN LEE MANGUM</b>            | Age            | <b>31</b>       | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                                           |
| Bride's Name                 | <b>LYNDA J. ADKINS</b>             | Age            | <b>31</b>       | Birthplace | <b>VIRGINIA</b><br><small>(State)</small> |
| Bride's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                        |                |                 |            |                                           |

**James E. Davis**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 29, 86**

**Magothy United Methodist Church**

Title and Religious Denomination or Office

**3703 Mountaih Rd., Pasadena, MD 21222**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 21, 1986**

**M. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38910

LICENSE NO.  
 66812

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                                           |
|------------------------------|----------------------------------------|----------------|-----------------|------------|-------------------------------------------|
| Groom's Name                 | <b>Michael Anthony Watson</b>          | Age            | <b>32</b>       | Birthplace | <b>Colorado</b><br><small>(State)</small> |
| Groom's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Divorced</b> |            |                                           |
| Bride's Name                 | <b>Deborah Sue Hooper</b>              | Age            | <b>26</b>       | Birthplace | <b>Indiana</b><br><small>(State)</small>  |
| Bride's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Single</b>   |            |                                           |
| Relationship to groom if any | <b>None</b>                            |                |                 |            |                                           |

**James E. Davis**

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 29**

**86**

**Magothy United Methodist Church**

Title and Religious Denomination or Office

**3703 Mountain Rd., Pasadena, MD 21122**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 7, 1986**

License Fee **\$25.00**

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38911

LICENSE NO.  
 66815

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 21st day of November 19 86

the following persons were by me united in marriage at Brooklyn Par, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                      |                |               |            |                                           |
|------------------------------|--------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>Bruce Charles Stolins</b>         | Age            | <b>19</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Groom's Residence            | <b>Baltimore, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Bride's Name                 | <b>Vicky Ann Hauf</b>                | Age            | <b>20</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Bride's Residence            | <b>Baltimore, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                          |                |               |            |                                           |

**William C. Miller Jr.**

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 29**

**86**

**Minister Untited Methodist Church**

Title and Religious Denomination or Office

**105 Doris Ave., Baltimore Maryland 21225**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOvember 26, 1986**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38912

LICENSE NO.  
 66817

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Linthicum Heights  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |               |            |                                           |
|------------------------------|----------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>Victor Marco Dilonardo</b>          | Age            | <b>29</b>     | Birthplace | <b>New York</b><br><small>(State)</small> |
| Groom's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Bride's Name                 | <b>Joanne Lynne Bowen</b>              | Age            | <b>24</b>     | Birthplace | <b>Maryland</b><br><small>(State)</small> |
| Bride's Residence            | <b>Glen Burnie, A.A. Co., Maryland</b> | Marital Status | <b>Single</b> |            |                                           |
| Relationship to groom if any | <b>None</b>                            |                |               |            |                                           |

Reg. D. Barss

Name of Officiating Clergy or Authorized Officer

Pastor, Linthicum Heights United Methodist Church

Title and Religious Denomination or Office

200 School Lane Linthicum, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 19, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$25.00

License Date Oct. 29 86

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

State of Maryland

86-38913

LICENSE NO.

66822

Copy for State Department of Health and Mental Hygiene

## ANNE ARUNDEL COUNTY (02)

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Lothian, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

James Wilbur Paddy, Jr.

Age 25 Birthplace Maryland  
(State)

Groom's  
Residence

Lothian, A.A. Co., Maryland

Marital Status Single

Bride's  
Name

Kristie Louise Walker

Age 22 Birthplace Maryland  
(State)

Bride's  
Residence

Rose Haven, A.A. Co., Maryland

Marital Status Single

Relationship to groom if any

None

William H.C. Ticknor

Name of Officiating Clergy or Authorized Officer

Priest of the Episcopal Church

Title and Religious Denomination or Office

St. James Parish Lothian MD 20711

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 13, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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*Certificate of Marriage*  
*State of Maryland*

86-38914

LICENSE NO.  
 66830

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 14<sup>th</sup> day of Novembet 19 86

the following persons were by me united in marriage at Annapolis, Marland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**JAMES S. WILLIAMS, III**

Age **25**

Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**ANNAPOLIS, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Bride's  
 Name

**LISA MARIE HALL**

Age **26**

Birthplace **MARYLAND**  
(State)

Bride's

Residence

**ANNAPOLIS, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

Rev. Leland Higginbotham

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 30, 86**

Minister at Large American Baptist Conv.

Title and Religious Denomination or Office

745 Red Cedar Rd., Annapolis, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

**21401**

I hereby certify that the above is a true copy of a record filed in this

office on Novem ber 18, 1986

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

License Fee **\$25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38915

LICENSE NO.

66837

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                 |                |               |            |                 |
|------------------------------|---------------------------------|----------------|---------------|------------|-----------------|
| Groom's Name                 | <b>SCOTT GRAY MCGEE</b>         | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b> |
| Groom's Residence            | <b>PASADENA A.A. CO. MD</b>     | Marital Status | <b>SINGLE</b> |            |                 |
| Bride's Name                 | <b>MARIE ANTOIENTTE BARCLAY</b> | Age            | <b>19</b>     | Birthplace | <b>ALABAMA</b>  |
| Bride's Residence            | <b>PASADENA A.A. CO. MD</b>     | Marital Status | <b>SINGLE</b> |            |                 |
| Relationship to groom if any | <b>NONE</b>                     |                |               |            |                 |

Rev. Bonie Ginevan

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 30 86**

Church of Gospel Ministry in

Title and Religious Denomination or Office

724-213rd St. Pasadean, Maryland 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 14, 1986

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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*Certificate of Marriage*  
*State of Maryland*

86-38916

LICENSE NO.  
66838

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 7th day of November 19 86

the following persons were by me united in marriage at Annapolis, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**David Lee Carlson**

Age **21**

Birthplace

**Maryland**  
(State)

Groom's  
Residence

**Pasadena, A.A. Co., Maryland**

Marital Status

**Single**

Bride's  
Name

**Sharon Hollister Beatty**

Age **30**

Birthplace

**Maryland**  
(State)

Bride's  
Residence

**Glen Burnie, A.A. Co., Maryland**

Marital Status

**Single**

Relationship to groom if any

**None**

Stanford G. Ellsworth

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 30**

**86**

Bishop, Church of Jesus Christ of Latter Da

Title and Religious Denomination or Office

**Saints**

443 Maryleborn Rd., Severna Par, MD 21146

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 13, 1986**

License Fee \$ **25.00**

E. AUBREY COLLISON, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

86-38917

## State of Maryland

LICENSE NO.

66846

Copy for State Department of Health and Mental Hygiene

### ANNE ARUNDEL COUNTY (02)

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Churchton, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**Wilfredo F. Kovacs**

Age

30

Birthplace

**Puerto Rico**  
(State)

Groom's  
Residence

**Churchton, A.A. Co., Maryland**

Marital Status

**Divorced**

Bride's  
Name

**Brenda Sue Carter**

Age

28

Birthplace

**Maryland**  
(State)

Bride's  
Residence

**Churchton, A.A. Co., Maryland**

Marital Status

**Divorced**

Relationship to groom if any

**None**

**Richard J. Mortimore**

Name of Officiating Clergy or Authorized Officer

**United Methodist Pastor**

Title and Religious Denomination or Office

**710 Manon Bench Rd., Deale, MD 20751**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 24, 1986**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

License Fee **\$25.00**

License Date **Oct. 31**

**86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



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*Certificate of Marriage*  
*State of Maryland*

86-38918

LICENSE NO.  
66847

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 1986

the following persons were by me united in marriage at Odenton, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                 |            |                            |
|------------------------------|----------------------------------------|----------------|-----------------|------------|----------------------------|
| Groom's Name                 | <b>Samuel A. Harrison</b>              | Age            | <b>58</b>       | Birthplace | <b>Maryland</b><br>(State) |
| Groom's Residence            | <b>Grasonville, Q.A. Co., Maryland</b> | Marital Status | <b>Widower</b>  |            |                            |
| Bride's Name                 | <b>Betty L. Brown</b>                  | Age            | <b>50</b>       | Birthplace | <b>Maryland</b><br>(State) |
| Bride's Residence            | <b>Severn, A.A. Co., Maryland</b>      | Marital Status | <b>Divorced</b> |            |                            |
| Relationship to groom if any | <b>None</b>                            |                |                 |            |                            |

**James Davis Manning**

Name of Officiating Clergy or Authorized Officer

**Pastor, Nichols Behtel U. Methodist Church**

Title and Religious Denomination or Office

**Odenton, Maryland 2113**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **December 1, 1986**

**H. ERLE SCHAFER, CLERK**

Signature — Clerk of the Court

License Fee **\$25.00**

License Date **Oct. 31 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38919

LICENSE NO.  
 66856

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 1st day of November 19 86

the following persons were by me united in marriage at Riviera Beach, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                    |                |               |            |                                           |
|------------------------------|------------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>CHARLES DANIEL HOY</b>          | Age            | <b>21</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>CLAUDIA LOUISE FLOYD</b>        | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                        |                |               |            |                                           |

Rev. Daniel Free

Name of Officiating Clergy or Authorized Officer

Roman Catholic Church

Title and Religious Denomination or Office

3800 Frederick Avenue, Baltimore, MD 21229

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
 office on November 6, 1986

License Fee \$25.00

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



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This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38920

LICENSE NO.  
66861

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Ft. Meade, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                  |                |                 |            |                               |
|------------------------------|----------------------------------|----------------|-----------------|------------|-------------------------------|
| Groom's Name                 | <b>CHARLES L. WARREN</b>         | Age            | <b>30</b>       | Birthplace | <b>N. CAROLINA</b><br>(State) |
| Groom's Residence            | <b>SEVERN, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>   |            |                               |
| Bride's Name                 | <b>SHIRLEY CRAWFORD</b>          | Age            | <b>28</b>       | Birthplace | <b>PHILIPPINES</b><br>(State) |
| Bride's Residence            | <b>SEVERN, A.A.CO., MARYLAND</b> | Marital Status | <b>DIVORCED</b> |            |                               |
| Relationship to groom if any | <b>NONE</b>                      |                |                 |            |                               |

\$25.00MA

002AAC10-30-86HU34

License Date **NOV. 3rd** **86**

John G. Hickman

Name of Officiating Clergy or Authorized Officer

Chaplain Captain USA American Baptist Churches

Title and Religious Denomination or Office

519th Military Police Battalion Ft. Meade,  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

MD 20755

I hereby certify that the above is a true copy of a record filed in this

office on November 14, 1986

E. AUBREY COLLISON, CLERK

License Fee \$**25.00**

Signature - Clerk of the Court





2

*Certificate of Marriage*  
*State of Maryland*

86-38921

LICENSE NO.  
 66864

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Annapolis, Mrland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**C. BENSON PLOWMAN**

Age **33**

Birthplace **MARYLAND**  
(State)

Groom's  
 Residence

**ANNAPOLIS, A.A. CO., MARYLAND**

Marital Status **DIVORCED**

Bride's  
 Name

**CAROLYN H. SANDERS**

Age **35**

Birthplace **TEXAS**  
(State)

Bride's  
 Residence

**ANNAPOLIS, A.A. CO., MARYLAND**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

Vernon L. Thompson

Name of Officiating Clergy or Authorized Officer

Pastor, Calvary United Methodist

Title and Religious Denomination or Office

301 Rowe Blvd. Annapolis, Maryland 21404

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 08, 1986

License Fee \$ 25.00

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

\$25.00NA

001AACC10-30-866960

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



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This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38922

LICENSE NO.  
66867

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 1986

the following persons were by me united in marriage at Severn, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**JEFFERY SCOTT COLLIER**

Age **20**

Birthplace **MARYLAND**  
(State)

Groom's

Residence

**GLEN BURNIE, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Bride's

Name

**TONYA JEAN QUARLES**

Age **18**

Birthplace **MARYLAND**  
(State)

Bride's

Residence

**GLEN BURNIE, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**Charles A. Donophan**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 3** 86

**Pastor, Severn United Methodist Church**

Title and Religious Denomination or Office

**1215 Old Camp Meade Road, Severn 21144**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 28, 1986**

License Fee \$ **25.00**

**E. AUBREY COLLISON, CLERK**

Signature - Clerk of the Court

\$25.00

001AACC10-31-866967



2

*Certificate of Marriage*  
*State of Maryland*

86-38923

LICENSE NO.  
 66868

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Severn, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                        |                |                                                      |
|------------------------------|----------------------------------------|----------------|------------------------------------------------------|
| Groom's Name                 | <b>ROBERT ERIC GARDNER</b>             | Age <b>24</b>  | Birthplace <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>PASADENA, A.A.CO., MARYLAND</b>     | Marital Status | <b>SINGLE</b>                                        |
| Bride's Name                 | <b>DEBORAH ELAINE CLINEDINST</b>       | Age <b>20</b>  | Birthplace <b>VIRGINIA</b><br><small>(State)</small> |
| Bride's Residence            | <b>MILLERSVILLE, A.A.CO., MARYLAND</b> | Marital Status | <b>SINGLE</b>                                        |
| Relationship to groom if any | <b>NONE</b>                            |                |                                                      |

Reverend Harold R. Bowman

Name of Officiating Clergy or Authorized Officer

Senior Minister-Heritage Church of God

Title and Religious Denomination or Office

8146 Quarterfield Road, Severn Maryland 21

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 19, 1986

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

License Date **NOV. 3rd 86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38924

LICENSE NO.  
 66873

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 8th day of November 19 86

the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                               |                |               |            |                                           |
|------------------------------|-------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>EUGENE VICTOR KLUG III</b> | Age            | <b>22</b>     | Birthplace | <b>FLORIDA</b><br><small>(State)</small>  |
| Groom's Residence            | <b>LINTHICUM A.A. CO. MD</b>  | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>BOBBI JEAN TURNER</b>      | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>BALTIMORE BALT. CO. MD</b> | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                   |                |               |            |                                           |

Rev. Eugene V. Klug

Name of Officiating Clergy or Authorized Officer

Pastor-United : Pentecostal

Title and Religious Denomination or Office

530 Shipley Rd., Linthicum, Maryland

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 13, 1986

E. AUBREY COLLISON, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

License Date **NOV. 3**

**86**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





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*Certificate of Marriage*  
*State of Maryland*

86-38925

LICENSE NO.  
 66875

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 1986

the following persons were by me united in marriage at Mayo, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

|                              |                                 |                |               |            |                                           |
|------------------------------|---------------------------------|----------------|---------------|------------|-------------------------------------------|
| Groom's Name                 | <b>JAMES EDWIN CONNER</b>       | Age            | <b>19</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Groom's Residence            | <b>EDGEWATER A.A. CO. MD</b>    | Marital Status | <b>SINGLE</b> |            |                                           |
| Bride's Name                 | <b>BONNIE ESTELLE CATTERTON</b> | Age            | <b>20</b>     | Birthplace | <b>MARYLAND</b><br><small>(State)</small> |
| Bride's Residence            | <b>GAMBRILLS A.A. CO. MD</b>    | Marital Status | <b>SINGLE</b> |            |                                           |
| Relationship to groom if any | <b>NONE</b>                     |                |               |            |                                           |

**Buddy R. Pipes**

Name of Officiating Clergy or Authorized Officer

**Mayo Memorial United Methodist Church**

Title and Religious Denomination or Office

**1012 Turkey Pt. Rd., Edgewater, MD 31037**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this  
 office on **November 25, 1986**

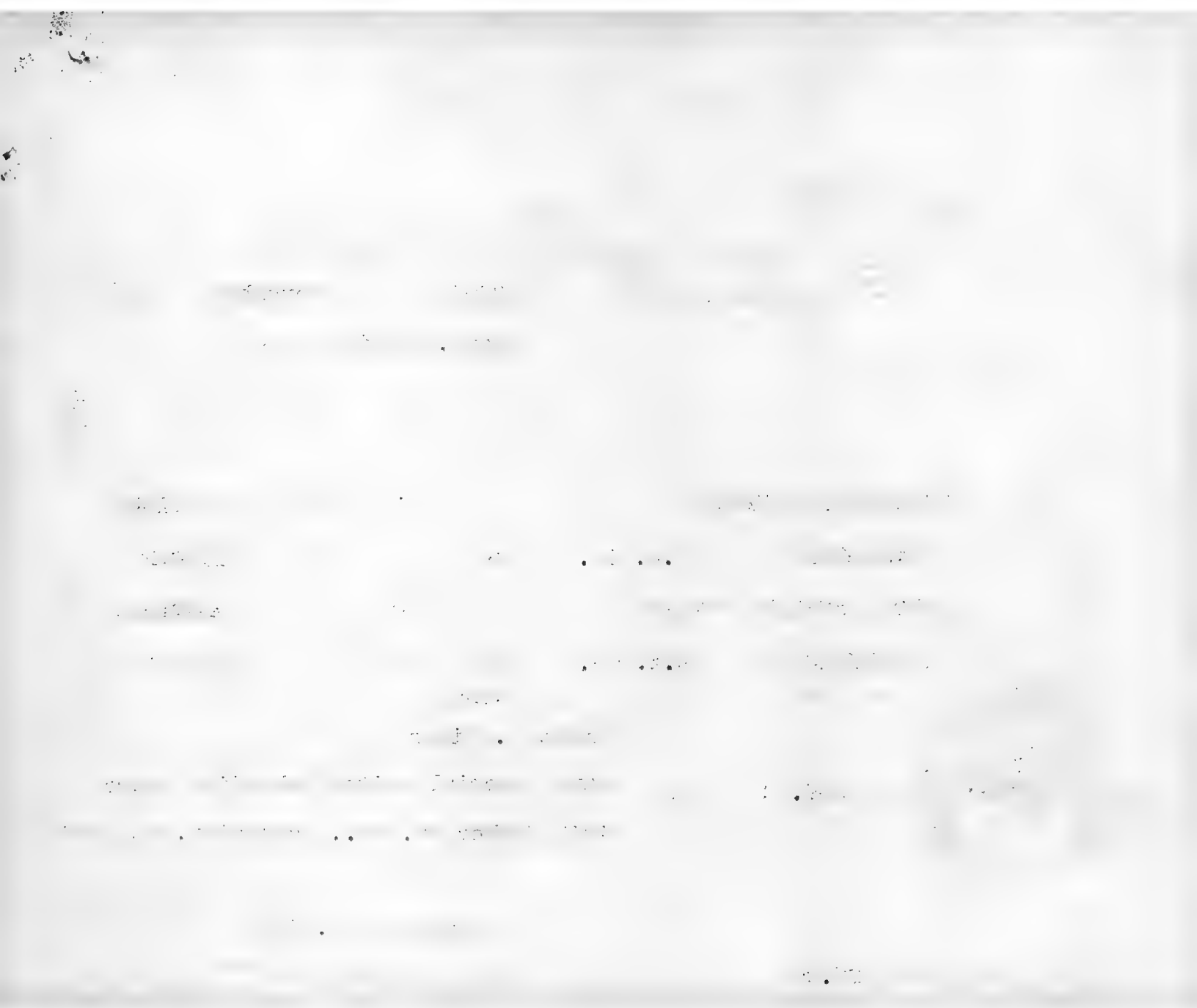
License Fee \$ **25.00**

**E. H. AULNEY COLLIER, CLERK**  
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

\$25.00

002AAC10-31-86#014



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This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

*Certificate of Marriage*  
*State of Maryland*

86-38926

LICENSE NO.  
66877

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 1986

the following persons were by me united in marriage at Millersville, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WINSTON SCOTT ROBINSON

Age 22

Birthplace GEORGIA  
(State)

Groom's

Residence

MILLERSVILLE, A.A. CO., MARYLAND

Marital Status SINGLE

Bride's

Name

TERESA ANN MASON

Age 24

Birthplace NEW YORK  
(State)

Bride's

Residence

SEVERNA PARK, A.A. CO., MARYLAND

Marital Status SINGLE

Relationship to groom if any

NONE

Rev. Mr. Albert F. Kosla

Name of Officiating Clergy or Authorized Officer

License Date NOV. 3 86

Deacon Catholic, Church

Title and Religious Denomination or Office

Our Lady of the Fields Millersville, MD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on December 1, 1986

H. ERLE SCHAFER, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

001AACC10-31-866970



2

## Certificate of Marriage

State of Maryland

86-38927

LICENSE NO.

66886

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**I Hereby Certify that on the 15th day of November 19 86the following persons were by me united in marriage at Glen Burnie, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**Fritz Dean Moczulski**Age **20**Birthplace **S. Carolina**  
(State)Groom's  
Residence**Glen Burnie, A.A. Co., Maryland**Marital Status **Single**Bride's  
Name**Roberta Dale Freitag**Age **20**Birthplace **Maryland**  
(State)Bride's  
Residence**Glen Burnie, A.A. Co., Maryland**Marital Status **Single**

Relationship to groom if any

**None**Donad B. Grohs

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 3****86**Pastor, American Lutheran Church

Title and Religious Denomination or Office

1506 Chruch Lane, Glen Burnie 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on November 19, 1986License Fee \$ 25.00E. AUBREY COLLSON, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

86-38928

LICENSE NO.  
 66900

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 15th day of November 19 86

the following persons were by me united in marriage at Severna Park, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**PAUL CHARLES STEPHENS**

Age **26** Birthplace **SCOTLAND**  
(State)

Groom's  
 Residence

**PASADENA, A.A.CO., MARYLAND**

Marital Status **DIVORCED**

Bride's  
 Name

**MICHELE RENEE HABEL**

Age **19** Birthplace **MARYLAND**  
(State)

Bride's  
 Residence

**PASADENA, A.A.CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

Petr Vroom

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 3rd** **86**

Pastor, Trinity Bible Church

Title and Religious Denomination or Office

107 Bosch Rd., Arnold, MD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 18, 1986

E. AUBREY COLLISON, CLERK

License Fee \$ **25.00**

Signature, Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38929

LICENSE NO.  
 66901

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 14<sup>th</sup> day of November 19 86

the following persons were by me united in marriage at Davidsonville, Maryland

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**DENNIS GERALD COALE, JR.**

Age 24 Birthplace MARYLAND

(State)

Groom's

Residence

**ANNAPOLIS, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Bride's

Name

**LISA MARIE McCATHRAN**

Age 22 Birthplace MARYLAND

(State)

Bride's

Residence

**ANNAPOLIS, A.A. CO., MARYLAND**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**Gerry L. Smith**

Name of Officiating Clergy or Authorized Officer

**Pastor, South River Bible Church**

Title and Religious Denomination or Office

**1003 Sherwood Forest Road, Annapolis, MD**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **November 17, 1986**

**E. AUBREY COLLISON, CLERK**

Signature — Clerk of the Court

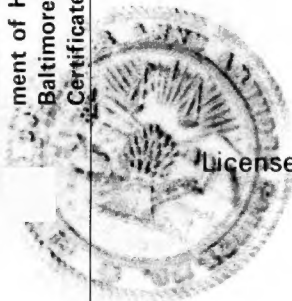
License Fee \$ **25.00**

License Date **NOV. 3 86**

\$25.00MA

001AACC11-03-866990

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

*Certificate of Marriage*  
*State of Maryland*

86-38930

LICENSE NO.  
 66905

Copy for State Department of Health and Mental Hygiene

**ANNE ARUNDEL COUNTY (02)**

*I Hereby Certify* that on the 22nd day of November 19 86

the following persons were by me united in marriage at Pasadena, Maryland  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name

**Michael Arthur Nisson**

Age 35 Birthplace Maryland  
(State)

Groom's

Residence

**Annapolis, A.A. Co., Maryland**

Marital Status **Divorced**

Bride's

Name

**Leslie Ann Lockard**

Age 32 Birthplace Michigan  
(State)

Bride's

Residence

**Annapolis, A.A. Co., Maryland**

Marital Status **Single**

Relationship to groom if any

**None**

**Dr. Robert T. Ireland**

Name of Officiating Clergy or Authorized Officer

License Date **Oct. 5th** **86**

**Elder United Methodist Church**

Title and Religious Denomination or Office

**503 Fox Den Lane, Millersville, MD 21108**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

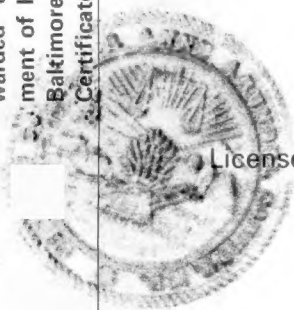
office on **November 25, 1986**

**E. AUBREY COLLISON, CLERK**

License Fee **35.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



00-38830

100-38830

11/25/66

November 22nd 1966

Pasadena, Maryland

Michael Arthur Wilson  
Annapolis, A.A. Co., Maryland  
Ladies and Gentlemen  
Annapolis, A.A. Co., Maryland

Dr. Robert T. Ireland

Elder United Methodist Church

503 Fox Den Lane, Millersville, MD 21108

November 25, 1966

Enclosed for you are

Enclosed for you are